

STATEMENTS ON CIGARETTE SMOKING AND HEALTH BY UNITED
STATES AND FOREIGN HEALTH ASSOCIATIONS AND ORGANIZATIONS,
MEDICAL SOCIETIES, GOVERNMENTAL PUBLIC HEALTH BODIES
AND OFFICIALS, AND INTERNATIONAL HEALTH ORGANIZATIONS.

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IN THE UNITED STATES

HEALTH ASSOCIATIONS

10-21-59 American Public Health Association

"Lung Cancer and Cigarette Smoking"

"WHEREAS, lung cancer is a rapidly increasing fatal disease which now kills more than 25,000 people in the United States each year and if present trends continue will claim the lives of more than 1,000,000 present school children in this country before they reach the age of 70 years, and

"WHEREAS, scientific evidence has established that excessive cigarette smoking is a major factor in the disease, and

"WHEREAS, public health officials of the United States and many other countries have pointed out the relationship between cigarette smoking and lung cancer, therefore be it

"RESOLVED, that the American Public Health Association call upon health authorities to undertake a broad educational effort, especially among young people, to prevent cigarette smoking, and be it further

"RESOLVED, that the American Public Health Association urge health authorities to collaborate with voluntary health organizations and with educational authorities in this effort."

Resolution adopted by the American Public Health Association, 87th Annual Meeting, October 21, 1959, as reported in the American Journal of Public Health, 49: 1695-1698, December 1959 - See Appendix I, Exhibit 1.

11-13-63 "Cigarette Smoking and Health"

"The size of the lung cancer problem in this country at the present time is such as to warrant

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urgent implementation of any and all preventive measures that have reasonable prospects of success. Evidence indicates that cigarette smoking is an important factor in the etiology of squamous carcinoma of the lung, and that the most reasonable explanation for the increase in the frequency of this form of cancer since 1920 is the increase in cigarette smoking that has occurred in the same period. Moreover, the desirability of public health action in relation to cigarette smoking is augmented by evidence that cigarette smoking is associated with increased risk of other disease states, in particular coronary heart disease, chronic respiratory disease, and cancer of the urinary bladder.

Additional information is needed on the mechanism or mechanisms whereby cigarette smoking increases susceptibility to these disorders. But until these mechanisms are identified and are shown to be susceptible to manipulation, preventive action can be directed only at reduction of the total amount of cigarette smoking prevalent in the population.

Believing that the above considerations require immediate and serious action to reduce cigarette smoking by the American people, the American Public Health Association:

1. Urges its members, in their professional activities and by private example, to provide leadership in the nation, the states, and in their individual communities in educational activities on the fact that the level of cigarette smoking in the United States at the present time constitutes a serious health hazard.
2. Offers to the Surgeon General of the U.S. Public Health Service, to other official and voluntary health agencies and professional health organizations, to schools and other community agencies, the support of the Association in initiating, planning and implementing an educational program, and other measures that may be devised to deal with this problem.
3. Urges the tobacco industry, their advertising service, and the National Association of Broadcasters to continue taking voluntary steps for the control of cigarette advertising in print media and on television and radio, particularly but not exclusively that directed at young people.

4. Urges those legislative bodies and bureaus that have appropriate functions to consider taking action within their legal powers to regulate the advertising of cigarettes that by its content or implications portrays cigarette smoking as being a wholesome or safe activity.
5. Urges continued research and demonstration of educational and action programs in schools and communities based on research in methods of deterring young people from beginning the smoking habit and of encouraging adults to give up or cut down on their smoking."

Resolution adopted by the American Public Health Service, 91st Annual Meeting, November 13, 1963 as reported in the American Journal of Public Health 54:125-126, January 1964 - See Appendix 1, Exhibit 2.

10-22-54

American Cancer Society, Inc.

"RESOLVED: That the American Cancer Society emphasize to the American people that the presently available evidence indicates an association between smoking, particularly cigarette smoking, and lung cancer, and to a lesser degree other forms of cancer"

Adopted by the Board of Directors, October 22, 1954. See Appendix I, Exhibit 3.

1-21-60

"The Board now believes that it has a further responsibility both to the medical profession and the general public to state that in its judgment the clinical, epidemiologic, experimental, chemical and pathologic evidence presented by the many studies which have been reported in recent years indicates beyond reasonable doubt that cigarette smoking is the major cause of the unprecedented increase in lung cancer. The Board further believes that all organizations and agencies concerned with cancer have a responsibility to formulate programs of action based upon this information in order to reduce the incidence of this largely preventable disease."

Action of the Board of Directors of the American Cancer Society, Inc., January 21, 1960, as reported in the Journal of the American Medical Association 172: 1425, March 26, 1960 - See Appendix I, Exhibit 4.

American Cancer Society, Inc. (cont.)

1963

"Studies of the relation of cigarette smoking to lung cancer have shown that cigarette smokers have increased death rates also for cancer of certain other sites and for a number of other diseases, notably coronary artery disease; chronic bronchitis and emphysema (Chart 4). The total result is a significant reduction in life expectancy among cigarette smokers. * * * More than 25 scientific studies in ten countries have shown that there is a high degree of relationship between cigarette smoking and lung cancer and that the risk of developing lung cancer is directly related to the number of cigarettes smoked.

* * *

Although spokesmen for the tobacco industry and a few scientists state that all this evidence does not prove that cigarette smoking causes lung cancer, there is no other reasonable explanation for the consistent association between cigarette smoking and lung cancer. Responsible health agencies, therefore, have no alternative but to act on the assumption that the relationship is one of cause and effect. This is the conclusion of leading governmental and nongovernmental health organizations and scientific societies of the United States, Canada and Europe and is the basis of the American Cancer Society's policies and programs."

From booklet "Cigarette Smoking and Cancer" published by American Cancer Society, Inc., 1963, pages 3 and 4. See Appendix I, Exhibit 5.

2-27-60

National Tuberculosis Association

"The National Tuberculosis Association warns all persons that: there is an alarming increase in deaths from lung cancer -- cigarette smoking is a major cause of lung cancer -- the risk of lung cancer increases with the number of cigarettes smoked. Giving up smoking reduces the risk of lung cancer. Recent studies show that cigarette smoking is a factor in such crippling lung diseases as chronic bronchitis and emphysema. There is no single cause for all lung cancers. Breathing polluted city air may also add to the risk of lung cancer. No present method of treating tobacco or filtering the smoke has been proved to reduce the

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2-27-60

National Tuberculosis Association (cont.)

harmful effects of cigarette smoking; up to now, these harmful effects can be avoided only by not smoking cigarettes. All persons should be given these facts. Parents, teachers, and physicians have a special opportunity and a duty to warn our youth of these facts before the cigarette smoking habit has become established."

Approved by the National Tuberculosis Association Board of Directors, February 27, 1960. See Appendix I, Exhibit 6.

6-8-63

American Heart Association

"The 1963 Ad Hoc Committee on Smoking and Cardiovascular Diseases" reported on May 11, 1963 "that there is sufficient evidence of the harmful effects of cigarette smoking on health to warrant discouraging teenagers from developing the habit of smoking. The primary evidence of the harmful effect of cigarette smoking remains the statistical relationship between smoking and mortality from coronary artery disease, but a number of ancillary features are also recognized, including effects in emphysema, peripheral vascular disease, and not to be overlooked, the relationship to carcinoma of the lung. Accordingly, the Committee recommends that the National Office of the American Heart Association, as well as Affiliate and Chapter Heart Associations be permitted to join with other voluntary and official health agencies in educational programs for teenagers relative to cigarette smoking. The Committee further recommends that strong encouragement to stop smoking, under physician supervision, be given people who have a high risk of death and illness from coronary artery disease and myocardial infarction, namely: those with high blood pressure, high blood cholesterol, overt signs of hardening of the arteries, a family history of heart attacks and strokes in middle age, or a combination of any of these."

* * *

"The Board of Directors approves the report of the 1963 Ad Hoc Committee on Smoking and Cardiovascular Diseases. This Report states that recent developments confirm and supplement the findings of the Report on Cigarette Smoking and Cardiovascular Diseases approved by the Board in 1960. Although the statistical association between heavy cigarette

6-8-63

American Heart Association (cont.)

smoking and increased morbidity from coronary heart disease does not prove causal relationship, the Board believes that there is sufficient evidence of the harmful effects of cigarette smoking to warrant the American Heart Association and its Affiliates and Chapters joining with other health agencies in educational programs to discourage cigarette smoking by the general public, with special emphasis on teenagers and persons who have high blood pressure, elevated blood cholesterol, signs of arteriosclerosis, or a family history of heart attacks or strokes.

Additionally, the American Heart Association is well aware of the relationship of heavy cigarette smoking to chronic pulmonary disease and cancer of the lung. Since these diseases are major public health problems, the Board of Directors believes that they provide additional reasons for the above recommendations."

Resolution on Cigarette Smoking and Cardiovascular Diseases including approval of the Report of the 1963 Ad Hoc Committee On Smoking and Cardiovascular Diseases voted by the American Heart Association Board of Directors on June 8, 1963. See Appendix I, Exhibit 7.

3-6-57

Joint Report of the Study Group on Smoking and Health

"The sum total of scientific evidence establishes beyond reasonable doubt that cigarette smoking is a causative factor in the rapidly increasing incidence of human epidermoid carcinoma of the lung.

The evidence of a cause - effect relationship is adequate for considering the initiation of public health measures. * * *

The Study Group concludes that the smoking of tobacco, particularly in the form of cigarettes, is an important health hazard. The implications of this statement are clear in terms of the need for thorough consideration of appropriate control measures on the part of the official and voluntary agencies concerned with the health of the people." * * *

Published in Science: a weekly official publication of the American Association for the Advancement of Science, Volume 125: 1129-1133, June 7, 1957. See Appendix I, Exhibit 8.

10-11-54

The Public Health Cancer Association of America

"RESOLVED, that there is sufficient evidence available of a relationship between smoking and lung cancer to justify advising the public to stop smoking cigarettes as a means eventually of lowering the incidence of lung cancer and to advise the youth of America to ponder well the question whether the risk entailed is worth the pleasure derived."

Resolution passed at Annual Meeting, October 11, 1954. See Appendix I, Exhibit 9.

March
1963

Commission on Cancer, California Medical Association

". . . the Commission feels obligated to affirm that this growing body of data supports the claim that cigarette smoking and, to a lesser degree, other tobacco products, are serious health hazards. . . Not all who smoke will get lung cancer, nor is it the only 'cause' of lung cancer. . . . However, any habit such as smoking, which is associated with 39,000 deaths in one year, a rate which will undoubtedly increase, is serious enough to warrant careful consideration by every physician."

Summary of Opinion, March 1963 as reported on page 19 of the booklet "Cigarette Smoking and Health" published by the California State Department of Health, August, 1963. See Appendix I, Exhibit 10.

June
1963

House of Delegates, American Medical Association

The Board of Trustees said that "the AMA is continuing its study of this important subject and is merely deferring any public pronouncement pending the availability of more information."

"The reference committee said it 'recognizes the deleterious effects on health of many toxic substances to which the people of our country are exposed that are not related to the use of tobacco.' It added that 'in the light of our present knowledge, however incomplete it might be, the AMA 'has a duty to point out the effects on the young of the use of toxic materials, including tobacco.'"

"It said it was in accord with the intent of resolutions from Ohio and Florida, but that 'because of the stature of the American Medical Association, it cannot

June
1963

House of Delegates. American Medical Association (cont.)

incriminate a single factor as an ideological agent in disease without complete documentation.'

"The Florida resolution - stronger of the two submitted at this session - declared that 'if smoking among school children continues to increase at the present rate, total disability and death from damage from pulmonary diseases will become so great as to produce a major medical and economic catastrophe in this country.'"

Report of Board of Trustees on Tobacco adopted by the House of Delegates at Annual Meeting, June 1963, as reported in the Journal of the American Medical Association 185:31-32, July 6, 1963. See Appendix I, Exhibit 11.

1-30-60

American Medical Association. Principles Governing Advertising in A.M.A. Scientific Publications.

"The American Medical Association seeks to promote the science and art of medicine and the betterment of public health."

* * *

"As a matter of policy, the A.M.A. will sell advertising space in its publications when (1) the buyer believes purchase of such space represents a sound expenditure; (2) the inclusion of advertising material does not interfere with or seriously detract from the purpose of the publication; and (3) the advertising copy meets the standards established for such publication.

* * *

"A. Eligibility for Advertising

* * *

- "4. Alcoholic beverages and tobacco products are not eligible for advertising."

From American Medical Association paper "Advertising In the A.M.A. Scientific Publications" published in The Journal of the American Medical Association 172:453-455, January 30, 1960. See Appendix I, Exhibit 12.

November
1963

California School Health Association

"WHEREAS, a review of the medical evidence and the statistical evidence indicates that cigarette smoking is a major health hazard with definite relationship to lung cancer, respiratory diseases, and cardiovascular disease; and

WHEREAS, it is estimated that if the trend of lung cancer mortality continues, more than 100,000 California children now of school age will die of lung cancer before reaching the age of 70 years; and

WHEREAS, organizations and groups such as the California State Board of Public Health, the California State Department of Education, the California Medical Association, the American Cancer Society - California Division, the California Heart Association, and the Tuberculosis and Health Association of California are engaged in an active program to educate citizens about the health hazards of cigarette smoking;

THEREFORE BE IT RESOLVED, that the California School Health Association actively support intensified instruction in the California schools on the health hazards of cigarette smoking; and

BE IT FURTHER RESOLVED, that members of C.S.H.A. who now smoke cigarettes give serious consideration to the effect of their example upon youth and to the effect of this practice on their own health."

Resolution adopted at Annual meeting of California School Health Association in November 1963 as reported on page 159 of March 1, 1964 issue of "California's Health" published by California State Department of Public Health. See Appendix I, Exhibit 13.

11-9-62

Hawaii Public Health Association

"WHEREAS, numerous studies conducted by the American Cancer Society, and by independent researchers in the United States and in other countries have pointed out a link between heavy cigaret smoking and many human diseases, including cancer of the mouth and lungs, heart disease and chronic lung disease; and

WHEREAS, cancer of the lung is at present the second most common cause of death among cancers in Hawaii and may be expected to increase in importance, and

WHEREAS, heart disease is the most common cause of death in Hawaii; and

WHEREAS, our young people are being induced to smoke by blandishing advertisements on television especially, but also in other media; and thus the health of the community is being jeopardized; therefore

BE IT RESOLVED that the Hawaii Public Health Association go on record as favoring a unified community effort to educate the public to the dangers of heavy cigaret smoking and to encourage the Department of Education to increase its program in this area; and

BE IT FURTHER RESOLVED that the Hawaii Public Health Association support the efforts of representatives of private health agencies and the Department of Health to form a coordinating committee to encourage and implement such a program."

Resolution adopted on November 9, 1962. See Appendix I, Exhibit 58.

4-27-62

The American College Health Association

"WHEREAS: A preponderance of scientific evidence (with scant counter evidence) indicates an association relationship and suggests a causal relationship between cigarette smoking and some diseases, and

"WHEREAS: The cigarette smoking habit often is acquired now by young people either not long before they commence college, or while they are attending college, and

"WHEREAS: Colleges and Universities are in a particularly advantageous position to undertake an effective educational effort to stop and to prevent

4-27-62

The American College Health Association (cont.)

cigarette smoking by college students, therefore be it

"RESOLVED: That the American College Health Association, recognizing the above mentioned relationships between cigarette smoking and some diseases, urges its entire membership - both institutional and individual - to attempt, in whatever ways considered most suitable, to discourage cigarette smoking by college students and future alumni!"

Adopted by the Council of the Association, April 27, 1962. Published in J. American College Health Ass'n, 11:24, October 1962, See Appendix 1, Exhibit 14.

January
1963

National Federation of State High School Athletic Associations

"WHEREAS a principal purpose of interschool athletics is to contribute to the establishment of the benefits of physical fitness, and

WHEREAS the abstinence from the use of tobacco and alcoholic beverages is considered to be desirable on the part of teenage athletes, and

WHEREAS the abstinence of tobacco and alcoholic beverages is accepted as contributing to healthful living for youths, and

WHEREAS high school age students are at a most impressionable state given to hero worshipping, and

WHEREAS there is need for great dedication on the part of school age athletes to accept training rules which have traditionally included an abstinence from the use of tobacco and alcoholic beverages;

BE IT HEREBY RESOLVED by the delegates assembled at the Conference on Secondary School Athletic Administration that professional athletes be earnestly requested to refrain from endorsing and/or to decline to permit the use of their names and/or pictures in the promotion of the and/or sale of tobacco or alcoholic beverages, and

BE IT FURTHER RESOLVED that the manufacturers, distributors, advertisers and news disseminating media

January
1963

National Federation of State High School Athletic
Associations (cont.)

refrain from soliciting athletes to endorse tobacco and/or alcoholic beverages in such programs, and

BE IT FURTHER RESOLVED that all organizations sponsoring programs in the area of growth and development of boys and girls aggressively support this resolution by indicating their disapproval of the practice of athletes endorsing the use of tobacco and alcoholic beverages."

Resolution adopted by the Executive Committee, January 7, 1963. See Appendix I, Exhibit 15.

May,
1963

National Federation of State High School Athletic
Associations and the Committee on the Medical
Aspects of Sports of the American Medical Association

"SMOKING AND SPORTS

The ability to produce maximum effort and to build endurance for sports is related to the capacity of the athlete to take in and utilize oxygen. This raises a serious question as to the effects of tobacco smoking on pulmonary function and, consequently, on athletic performance.

Obviously, performance in any athletic event that demands a maximum effort, for even a brief period, would be adversely affected by impairment of ventilatory capacity. After reviewing clinical and experimental evidence on this question, the Committee on the Medical Aspects of Sports of the American Medical Association recommends that athletes should be strongly advised against smoking.

Ten inhalations of cigarette smoke have been shown to materially reduce airway conductance to the lungs. The decrease amounted to as much as 50 per cent and lasted for as long as an hour. The reductions were attributed by the investigators to obstruction of the air ducts resulting from muscle contraction, edema, and nervous reflex. The changes occurred in smokers as well as nonsmokers and were reproducible.

In another study of pulmonary function and capacity, it was shown that the expiratory capacity, total lung capacity, and maximum breathing capacity were all significantly decreased in heavy smokers.

May,
1963

National Federation of State High School Athletic
Associations and the Committee on the Medical Aspects
of Sports of the American Medical Association (cont.)

Conversely, the ratio of residual volume (unexpired air) to total lung volume was increased in smokers. Decrease in maximum breathing capacity and increase in residual volume are particularly important to athletes since both changes impair capacity to take in oxygen and make it readily available to the body.

Other studies indicated a lower vital capacity in smokers and less efficient pulmonary function in even moderate exercise. Although athletes generally were found to have an increased vital capacity as compared with non-athletes, this was not as pronounced among athletes who smoked as it was for non-smoking athletes. Another significant finding is that the pulmonary diffusing capacity (ability to interchange oxygen and carbon monoxide in the body) of smokers is markedly reduced.

In summary, acute impairment of pulmonary function in young smokers as compared to non-smokers has been demonstrated. Significant decreases in maximum breathing capacity, which is most important to athletes, have also been disclosed probably due largely to obstruction of respiratory inflow. Efficient utilization of oxygen in the body is greatly hampered by decreases in its diffusibility in smokers. There is no longer any room for doubt that athletes should not smoke."

From comment on "Smoking and Sports" by the National Federation of State High School Athletic Associations and the Committee on the Medical Aspects of Sports of the American Medical Association. See Appendix I, Exhibit 16

3-17-61

Society of State Directors for Health, Physical
Education and Recreation

"RESOLVED, That the Society of State Directors of Health, Physical Education and Recreation go on record as encouraging the voluntary health agencies and the public health service to continue and intensify their efforts to educate young people about smoking, utilizing all appropriate methods, including the wide distribution of materials, and be it further

3-17-61

Society of State Directors for Health, Physical
Education and Recreation (cont.)

RESOLVED, That the Society of State Directors of Health, Physical Education and Recreation go on record as favoring an intensive program of education to acquaint young people with such scientific information as will help them understand the harmful effects of cigarette smoking and will lead them away from the use of tobacco."

Adopted at the 35th Annual Meeting of the Society, March 17, 1961. See Appendix I, Exhibit 17.

5-22-63

National Congress of Parents and Teachers

WHEREAS, The use of tobacco by minors is of great concern to parents and teachers; therefore be it

"RESOLVED, That the National Congress of Parents and Teachers with its state congresses, districts, councils, and local units intensify efforts to strengthen health education programs related to the use of tobacco by minors; and be it further

"RESOLVED, That the National Congress of Parents and Teachers invite representatives from the tobacco industry, the advertising field, and the mass media to meet with representatives of the National Congress to consider the effects of glamorized tobacco advertising directed to teen-agers."

Adopted by Delegates of the 1963 Convention on May 22, 1963. See Appendix I, Exhibit 18.

IN THE UNITED STATES

MEDICAL SOCIETIES

6-22-62

American College of Chest Physicians

"WHEREAS, the weight of scientific evidence distinctly indicates that cigarette smoking and the inhalation of other atmospheric pollutants have an association relationship which strongly suggests a cause and effect connection with chronic bronchitis, pulmonary emphysema, cor pulmonale, cardiovascular disease and cancer of the lung, and Whereas, there is increasing scientific evidence that viruses and other agents still to be defined may play a role in the etiology of cancer,

"THEREFORE, BE IT RESOLVED that the Board of Regents of the American College of Chest Physicians urge all of its members and the medical profession in general to intensify their educational campaign directed toward the public in general and the youth in particular relative to the health hazards of smoking . . ."

From a resolution approved by the Board of Regents, June 22, 1962, published in Diseases of The Chest 42: 233, August 1962. See Appendix I, Exhibit 19

4-10-63

American Association For Thoracic Surgery

"WHEREAS, bronchogenic carcinoma, pulmonary emphysema, and circulatory disorders are increasing alarmingly, and

WHEREAS, extensive prospective statistical studies on a large number of persons demonstrate that the incidence of bronchogenic carcinoma is proportionate to the incidence and amount of cigarette smoking, and

WHEREAS, a substantial percentage of epidermoid carcinoma of the bronchus can probably be prevented by avoidance of cigarette smoking, and

WHEREAS, the members of the American Association for Thoracic Surgery are keenly aware of these increasing menaces to the health of the people of our nation and therefore are obligated to call the attention of the medical profession and the lay public to these hazards,

4-10-63

American Association For Thoracic Surgery (cont.)

BE IT THEREFORE RESOLVED that the American Association for Thoracic Surgery take official cognizance of the increasing hazards of bronchogenic carcinoma, pulmonary emphysema and their relationship to cigarette smoking, and

BE IT FURTHER RESOLVED that notice of this action be sent to the Surgeon General of the U. S. Public Health Service and the American Medical Association, that the medical profession be informed through appropriate publications and that the lay public be informed through the lay press."

Passed by the American Association for Thoracic Surgery, April 10, 1963. See Appendix I, Exhibit 20.

3-27-63

California Medical Association

"RESOLVED: That the California Medical Association take steps on a statewide basis to publicize, particularly in schools and homes, the harmful effects of cigaret smoking."

Adopted by House of Delegates, March 27, 1963. See Appendix I, Exhibit 21(a). Also reported on pages 20 and 21 of booklet "Cigarette Smoking and Health" published by California State Department of Public Health, August 1963. See Appendix I, Exhibit 21(b).

9-13-63

Colorado Medical Society Committee On Pulmonary Diseases

"The Committee suggests that the Colorado Medical Society take a positive position that the inhaling of tobacco smoke, especially from cigarettes, is harmful to human health. It urges all parents, teachers, voluntary health agencies, other interested persons and especially its own members, to do everything possible to discourage smoking and especially to discourage young people from starting to smoke. It urges each individual Society member to consider whether he or she can afford not to set an example for all other citizens on this important subject."

Approved by House of Delegates, Colorado Medical Society September 13, 1963, as reported in Rocky Mountain Medical Journal 60:46, December, 1963, and by the Executive Secretary. See Appendix I, Exhibit 22(a) and (b).

12-11-63 .. Connecticut State Medical Society

"WHEREAS, The Connecticut State Medical Society represents the medical profession of the State of Connecticut; and

WHEREAS, this Society is aware of its responsibility to the citizens of the State of Connecticut; and

WHEREAS, the preponderance of evidence indicates that cigarette smoking is strongly implicated in the genesis of lung cancer, chronic bronchitis, and emphysema; and

WHEREAS, There is strong statistical association between cigarette smoking and illness and death from coronary artery disease; therefore be it

RESOLVED, that the Connecticut State Medical Society go on record as advocating the giving up of cigarette smoking by those already habituated; and be it further

RESOLVED, that the Connecticut State Medical Society further go on record as advocating that the youth of our state be encouraged not to acquire the tobacco habit for health reasons; and be it further

RESOLVED, that the Connecticut State Medical Society officially endorse programs of teaching these dangers to health from smoking to the grade and high school level youth of our state, and that a copy of this resolution be sent to the Commissioner of Education for the State of Connecticut."

Passed by the House of Delegates, December 11, 1963.
Published in Connecticut Medicine, 28:59-60, January, 1964. See Appendix I, Exhibit 23.

5-27-63 District of Columbia Medical Society

"WHEREAS, The preponderance of the evidence indicates that cigarette smoking is implicated in the genesis of lung cancer and probably other diseases; and

WHEREAS, The District of Columbia Medical Society is concerned in all matters relating to the public health; therefore be it

RESOLVED, That the District of Columbia Medical Society cooperate with the American Cancer Society, District of

5-27-63

District of Columbia Medical Society (cont.)

Columbia Division, in its educational program to influence young people not to start the habit of smoking cigarettes."

Adopted by the Executive Board, May 27, 1963, as reported in the Medical Annals of the District of Columbia 32: 293, July 1963. See Appendix I, Exhibit 24.

5-19-63

Florida Medical Association

"WHEREAS, the preponderance of evidence indicates that cigarette smoking is strongly implicated in the genesis of lung cancer, chronic bronchitis and emphysema; therefore be it

RESOLVED, that the Florida Medical Association go on record as advocating the voluntary giving up of cigarette smoking by those now smoking; and be it further

RESOLVED, that the Florida Medical Association through an appropriate committee help develop new, where none exists, and support and encourage existing educational programs designed to influence young people not to start the habit of smoking; and be it further

RESOLVED, that the Florida delegates to the American Medical Association introduce a similar resolution to the American Medical Association at the annual meeting, June, 1963."

Adopted by the House of Delegates, May 19, 1963. Published in J. Florida Medical Association 50: 42-43, July 1963. See Appendix I, Exhibit 25.

June
1963

Florida Delegation Resolution to American Medical Association House of Delegates Annual Meeting.

"Whereas, In recent years there has been a large and progressive increase in the incidence of cancer of the lung (epidermoid type), chronic bronchitis and emphysema, and

Whereas, The preponderance, if not all of the authoritative scientific evidence indicates that smoking of tobacco, especially cigarettes, is strongly implicated in the genesis of epidermoid lung cancer, chronic bronchitis and emphysema. Furthermore, it has an adverse effect on heart and vascular disease, peptic ulcer and is associated with a general decrease in longevity. And that giving up smoking at any age

June
1963

Florida Delegation Resolution to American Medical
Association House of Delegates Annual Meeting (cont.)

decreases the risk, and

Whereas, Cancer of the lung is fatal in approximately 95% of such cases, and

Whereas, Severe pulmonary emphysema causes irreversible total physical disability and was rated Number Two as being the cause of total permanent disability throughout the United States in 1962, and

Whereas, Statistical data gathered in many Junior and Senior high schools across the nation show that 20-75% of the students smoke, with a tremendous increase of smoking in children 10-14 years of age, and

Whereas, If smoking among school children continues to increase at the present rate, total disability and death from pulmonary diseases will become so great as to produce a major medical and economic catastrophe in this country, and

Whereas, Mass advertising media directs or aims much of its publicity toward the youth of our nation as stated by LeRoy Collins, President of the National Broadcasters Association: and

Whereas, Major chest disease organizations throughout the world, most public health agencies and organizations, many voluntary health groups, many county medical societies and at least three state medical associations (California, New York and Florida) have passed strong resolutions and statements to the effect that smoking is a serious health hazard; and

Whereas, The leading medical association of the world, the American Medical Association, its individual members together with allied groups and organizations are the guardians of the health of our nation and are interested in all public health matters especially as they relate to preventable disease, and

Whereas, The public expects direction, guidance and deliverance from confusion relating to this important health matter, organized medicine should once again take a positive stand; therefore be it

Resolved, That the American Medical Association recognizes the health hazard inherent in smoking and advocates voluntary giving up of smoking by

June
1963

Florida Delegation Resolution to American Medical Association House of Delegates Annual Meeting.(cont.)

those already habituated, be it further

Resolved, That the American Medical Association, through appropriate channels, in cooperation with other agencies and groups which having education programs, initiate and maintain effective and aggressive methods designed to influence young people not to start the smoking habit, be it further

Resolved, That the American Medical Association and its individual members support appropriate legislation to inform the public in the protection of the health of our people; be it further

Resolved, That the American Medical Association's policy on smoking and health be made known immediately to physicians and the public at large."

Resolution on Smoking and Health submitted by Florida Delegation to American Medical Association House of Delegates at Annual meeting in June, 1963. See Appendix I, Exhibit 26.

5-3-63

Hawaii Medical Association

"WHEREAS, the Hawaii Medical Association represents the medical profession of the State of Hawaii; and

WHEREAS, this association is aware of its responsibility to the citizens of the State of Hawaii; and

WHEREAS, there is mounting evidence of a direct causal relationship between cigarette smoking and lung cancer; and

WHEREAS, there is a strong statistical association between cigarette smoking and illness and death from coronary artery disease; and

WHEREAS, there has been an alarming increase in the incidence and mortality of lung cancer in men of over 100 per cent during the past ten years; and

WHEREAS, death rates from coronary artery disease in middle aged men are from 50 to 150 per cent higher among heavy cigarette smokers than among those who do not smoke; now therefore be it

Hawaii Medical Association (cont.)

5-3-63

RESOLVED, that the Hawaii Medical Association, aware as it is of its duty to alert the citizens of Hawaii to public health hazards, wishes to acknowledge the causal relationship between cigarette smoking and lung cancer, and the strong statistical association between heavy cigarette smoking and coronary artery disease; and be it further

RESOLVED, that this association wishes to encourage dissemination of information to the public regarding the relationship of cigarette smoking to these two serious health hazards."

Resolution adopted by House of Delegates, Hawaii Medical Association, May 3, 1963. Reported in Hawaii Medical Journal 22: 466, July-August, 1963. See Appendix I, Exhibit 27.

6-27-63

Idaho State Medical Association

"WHEREAS, it has been established scientifically by numerous investigators, widely separated and working independently, that a direct relationship exists between the use of cigarettes and the incidence of lung cancer, emphysema (chronic bronchitis) as well as certain types of heart disease (vascular), and;

WHEREAS, the incidence increase in the above-noted diseases is truly alarming, and may well in the period of the next decade take its place as the greatest health hazard facing the American people, statisticians predict an increase of from the present 40 to possibly 80 deaths per hundred thousand population each year from lung cancer alone, and

WHEREAS, only five per cent of lung cancer cases are operable when diagnosed due to its inherent and peculiar habit of early metastasis which may sometimes usher in the symptoms of its presence thus, prevention is of utmost importance if a very significant segment of our population is to be spared its ravages, and

WHEREAS, the tobacco industry through the use of an elaborate and expensive advertising program attempts, and too often successfully, to present cigarette smoking to young adults in particular as a sophisticated and adult pattern of behavior, and

2024991660

6-27-63

Idaho State Medical Association (cont.)

WHEREAS, in so doing the dangers of the cigarette habit are not mentioned and in some printed advertising are minimized, rejected or even denied; therefore be it

RESOLVED, that this House of Delegates of the Idaho State Medical Association urge the local medical societies to initiate a program of dissemination of information concerning the harmful effects of tobacco on all body systems in cooperation with existing health organizations."

Resolution No. "B" adopted by the House of Delegates, Idaho State Medical Society 71st Annual Meeting, June 27, 1963. Reported in Northwest Medicine 62: 660, August 1963. See Appendix I, Exhibit 28.

3-3-62

Maine Chapter, American Academy of General Practice

"BE IT RESOLVED: That the State of Maine Chapter of the American Academy of General Practice, aware as it is, of its duty to alert the citizens of the State of Maine of public health hazards, wishes to acknowledge an apparent causal relationship between cigarette smoking and lung cancer, and

"BE IT FURTHER RESOLVED: That this group of physicians desires to encourage the dissemination of information regarding an apparent causal relationship between cigarette smoking and lung cancer."

Adopted March 3, 1962. Appendix I, Exhibit 29.

4-8-62

Maine Medical Association

"WHEREAS, the Maine Medical Association represents the medical profession of the State of Maine, and

WHEREAS, this Association is aware of its responsibilities toward the citizens of the State of Maine, and

WHEREAS, there is mounting evidence of a causal relationship between cigarette smoking and lung cancer, and

WHEREAS, no less a person that the Surgeon-General of the United States Public Health Service has noted this causal relationship, and

WHEREAS, it has been estimated that 1,000,000 of our

4-8-62

Maine Medical Association (cont.)

present population of school children will die of lung cancer if present cigarette smoking trends continue

BE IT RESOLVED, that the Maine Medical Association, aware as it is, of its duty to alert the citizens of the State of Maine to public health hazards, wishes to acknowledge the causal relationship between cigarette smoking and lung cancer, and

BE IT FURTHER RESOLVED, that this Association desires to encourage the dissemination of information regarding the causal relationship between cigarette smoking and lung cancer."

Adopted April 8, 1962. Reported in J. of Maine Medical Ass'n. 53:120,129, May 1962. See Appendix I, Exhibit 30

2-6-63

Massachusetts Medical Society

"WHEREAS, the Massachusetts Medical Society represents the medical profession in the State of Massachusetts, and

WHEREAS, this Society is aware of its responsibilities to the citizens of the State of Massachusetts, and

WHEREAS, there is considerable scientific evidence to indicate that excessive tobacco smoking, particularly cigarettes, enhances the chance of certain chest diseases developing, particularly lung cancer and pulmonary insufficiency, as well as possibly cardiovascular disease; therefore, be it

RESOLVED, that the Massachusetts Medical Society does recognize the health hazard of excessive tobacco smoking to the individual citizen and wishes to encourage the dissemination of such information to the people of Massachusetts."

Resolution adopted by the Council of Massachusetts Medical Society February 6, 1963. See Appendix I, Exhibit 31

10-9-63

"Whereas, scientific evidence strongly indicates a relationship between cigarette smoking and such disorders as chronic bronchitis, pulmonary emphysema, cardiovascular diseases and cancer of the lung,

10-9-63

Massachusetts Medical Society (cont.)

therefore be it

"Resolved, that the Massachusetts Medical Society urge all of its members to intensify an educational campaign directed toward the public in general and youth in particular relative to the health hazards of smoking."

Resolution adopted by the Council of Massachusetts Medical Society, October 9, 1963. See Appendix I, Exhibit 31.

September
1960

Michigan State Medical Society

". . . Whereas, many efforts now being made can be enhanced by renewed activity and new approaches to the solutions of problems as is indicated by such examples as the following:

Because , if present rates continue, lung cancer will claim the lives of one million American children now in our schools;

Because, 23 studies in eight countries have shown that lung cancer patients are predominantly cigarette smokers;

Because, lung cancer cure rates are one in twenty, the American Cancer Society is conducting a nation-wide educational program for teen-agers on cigarettes and lung cancer Therefore be it

"RESOLVED: That the President's Program of the Michigan State Medical Society establish a well rounded and specific program for the prevention of accidents and disease; said program to recognize the efforts presently being made, to suggest means whereby these efforts can be improved, and to act as a coordinating source for public and professional information on this subject"

Resolution adopted by House of Delegates, Michigan State Medical Society , September 1960. Published in J.Mich.State Med.Soc., 60(No. 1-A):44-45, Jan. 1961. See Appendix I, Exhibit 32.

September
1963

"Whereas, the Michigan State Medical Society is concerned with all matters relating to public health; and

September
1963

Michigan State Medical Society (cont.)

Whereas, the Michigan State Medical Society is cognizant of its responsibilities to the citizens of the State of Michigan; therefore be it

RESOLVED: That the Michigan State Medical Society initiate and maintain a program to publicize the harmful effects of cigarette smoking, and to promote an educational program, particularly in schools and homes, to keep young people from starting the habit of smoking cigarettes."

Resolution adopted by House of Delegates, Michigan State Medical Society, September 1963. Published in J. Michigan State Med. Society, 63(No.1-A):36, Jan. 1964. See Appendix I, Exhibit 32

December
1963

Medical Society of New Jersey

"Whereas, there is definite statistical and apparent scientific evidence that lung cancer is more frequent in cigarette smokers than in non-smokers; and

Whereas, The Medical Society of New Jersey lists as one of its constitutional purposes 'to promote the betterment of public health; and to enlighten and direct public opinion in regard to the problems of medicine and health for the best interests of the people of New Jersey'; and

Whereas, the increasing incidence of fatal lung cancer is undeniably one of the pressing health problems of our day; now therefore be it

RESOLVED, that The Medical Society of New Jersey call upon the people of New Jersey to recognize the intimate connection between sustained cigarette smoking and lung cancer, and encourage:

1. those individuals who do not smoke cigarettes never to initiate the habit of smoking; and
2. those individuals who do smoke cigarettes to abandon, or restrict, their indulgence."

Adopted by Board of Trustees, December 1963. Published in The Journal of the Medical Society of New Jersey, February 1964, issue, page 76. See Appendix I, Exhibit 33.

2024991664

4-24-63

New Mexico Medical Society

"WHEREAS, it is now reasonably established that there exists a correlation between the use of tobacco and the incidence of cancer of the lung, cardiovascular diseases and respiratory diseases, and

WHEREAS, it is the duty of all doctors of medicine to do all things possible for the prevention of disease; and

WHEREAS, the State Medical Society is in a position to express the duties and responsibilities of its members;

THEREFORE BE IT RESOLVED, that the New Mexico Medical Society acknowledge the existence of this correlation, and that the Society endorse any approved program designed to reduce the incidence of these diseases."

Adopted at the Annual Meeting of the House of Delegates, April 24, 1963. See Appendix I, Exhibit 34.

5-17-63

Medical Society of the State of New York

"WHEREAS, the preponderance of the evidence indicates that cigaret smoking is implicated in the genesis of lung cancer and other diseases, notably cardiovascular, and is detrimental to health in other fields; and

WHEREAS, the Medical Society of the State of New York is concerned in all matters relating to the public health; now therefore be it hereby

RESOLVED, that the Medical Society of the State of New York go on record as advocating the voluntary giving up of cigarets by those already habituated; and be it further

RESOLVED, that the Medical Society of the State of New York recommend that physicians advise regarding the dangers of heavy cigaret smoking in their health counseling and community educational endeavors, particularly among the teen-age group."

Adopted by the House of Delegates, May 17, 1963.
Published in the New York State Journal of Medicine 63(Part II):103, September 1, 1963. See Appendix I, Exhibit 35.

2024991665

5-5-63

North Dakota State Medical Association

"WHEREAS, there is increasing evidence to show that smoking, particularly the inhalation of tobacco smoke, has a harmful effect on the health of our people, and

WHEREAS, the continuous use of tobacco over a long period of time appears to increase the dangers to our health,

NOW, THEREFORE, BE IT RESOLVED that the North Dakota State Medical Association advocate a voluntary giving up of smoking of cigarettes by those adults who have become habituated, and

BE IT FURTHER RESOLVED that a copy of this Resolution be forwarded to the Surgeon General of the United States Public Health Service, and a copy presented to the House of Delegates of the American Medical Association.

BE IT FURTHER RESOLVED that the North Dakota State Medical Association participate in the educational program of our youth to encourage them to avoid smoking, and

BE IT FURTHER RESOLVED, that a copy of this Resolution be given to the press covering this meeting."

Resolution adopted by the House of Delegates, North Dakota State Medical Society, 76th Annual Meeting, May 5, 1963. See Appendix I, Exhibit 36

10-13-62

Pennsylvania Medical Society

"WHEREAS, the preponderance of the evidence indicates that cigarette smoking is implicated in the genesis of lung cancer and probably other diseases; and

WHEREAS, the Pennsylvania Medical Society is concerned in all matters relating to the public health; therefore be it

RESOLVED, that the Pennsylvania Medical Society go on record as advocating the voluntary giving up of cigarette smoking by those already habituated; and be it further

RESOLVED, that the Pennsylvania Medical Society through

10-13-62

Pennsylvania Medical Society (cont.)

an appropriate committee or commission initiate and maintain an educational program designed to influence young people not to start the habit of smoking cigarettes."

Resolution adopted at the Annual Meeting of the House of Delegates, October 13, 1962. "RESOLVED" portion of resolution published in Pennsylvania Medical Journal 66: 81, March 1963. See Appendix I, Exhibit 37.

6-9-63

South Dakota State Medical Association

"The South Dakota State Medical Association endorses the position of the American Heart Association and the American Cancer Society on the effects of tobacco on the human body and recommends to the youth of the State that they abstain from adopting the smoking habit because of known and potential physical dangers."

Adopted at the Annual Meeting, June 9, 1963.
See Appendix I, Exhibit 38.

4-28-63

Texas Medical Association

"WHEREAS, it is becoming increasingly evident that illness and disease are at times caused by or in other instances aggravated by the smoking of tobacco, and

WHEREAS, our youth as well as adults are bombarded by pro-smoking advertisements without the dangers of smoking being elucidated; now, therefore be it

RESOLVED, that the Texas Medical Association go on record in an advisory capacity that the public at large and especially the youth of our state be encouraged not to acquire the tobacco habit for health reasons; and be it further

RESOLVED, that the Texas Medical Association officially endorse programs of teaching these dangers to health from smoking to the junior and senior high school level youth of our state, and that a copy of this resolution be sent to the Commissioner of Education for the State of Texas."

Resolution adopted by House of Delegates, Texas Medical Association, April 28, 1963. Reported in Texas State Journal of Medicine, 59: 633-634, June 1963. See Appendix I, Exhibit 39.

September
1960

Utah State Medical Association

"WHEREAS, there is mounting evidence incriminating tobacco as a carcinogenic agent, and

WHEREAS, there is evidence that tobacco has a detrimental effect on the cardiovascular system, and

WHEREAS, there is much confusion surrounding the position of the American Medical Association regarding the harmful effects of tobacco, and

WHEREAS, we believe that the medical profession should take the lead in all matters of health:

NOW THEREFORE BE IT RESOLVED, that the American Medical Association clarify its position regarding the harmful effects of tobacco,

NOW THEREFORE BE IT RESOLVED, that the American Medical Association take the lead in public educational campaign aimed at the youth of the United States, and

BE IT FURTHER RESOLVED, that this resolution be introduced in the House of Delegates American Medical Association Meeting in Washington, D. C. November 28, 1960 by the delegate from Utah."

Resolution adopted by House of Delegates, Utah State Medical Society, September 1960. Reported in the Utah Medical Journal 8: 24, October 1960. See Appendix I, Exhibit 40.

5-9-62

Vermont State Medical Society

"WHEREAS, the weight of scientific evidence implicates cigarette smoking as one of the principal causative factors in lung cancer and a contributing factor in cardiovascular and chronic pulmonary diseases;

NOW THEREFORE BE IT RESOLVED, that the House of Delegates of the Vermont State Medical Society formally recognizes these associations and recommends that its members cooperate in bringing this information to the people of Vermont."

Resolution adopted by House of Delegates, Vermont State Medical Society Annual Meeting, May 9, 1962. Reported on pg. 68 of the Annual Report for 1963. See Appendix I, Exhibit 41.

1-18-64 Vermont State Medical Society (cont.)

"Reaffirms its action of 1962 and endorses the Special Report on Smoking prepared by the Surgeon General's Special Study Committee and recommends and urges that the conclusions and recommendations contained in the report be widely publicized. The Council particularly urges that young people be made aware of the dangers of cigarette smoking and emphasizes that persons of all ages be urged not to smoke."

Adopted by Council of the Vermont State Medical Society, January 18, 1964. See Appendix I, Exhibit 41.

9-17-63 Washington State Medical Association

"BE IT RESOLVED, that the Washington State Medical Association: (1) Affirm all efforts to educate our citizens and particularly our youth as to the harmful effects of cigarette smoking; and (2) Instruct our Delegates to the American Medical Association to support such efforts."

Adopted by House of Delegates, 1963, (September 17). See Appendix I, Exhibit 42.

DENTAL SOCIETIES

9-24-63 Ohio State Dental Association

"Statement on Use of Tobacco in Relation to Systemic and Oral Health Dr. Paul E. Boyle, Delegate, Cleveland

Background Statement: The relationship of chewing and smoking tobacco to the genesis of cancer of the oral region has long been recognized. Scientific evidence now strongly indicates that cigarette smoking is directly related to the incidence of cancer of the lung, cardiovascular disease, emphysema and chronic bronchitis, and furthermore, is associated with a general decrease in longevity. Public health officials are urging that persons of all ages be informed of the health hazards of the use of tobacco.

The dental profession has demonstrated its interest and responsibility to the public for promoting preventive measures to improve total health and prolong life, as well as for the control of diseases of the oral cavity.

9-24-63.

Ohio State Dental Association (cont.)

RESOLVED, that the Ohio State Dental Association call upon and encourage its members to undertake an educational effort to inform their patients of the health hazards of the use of tobacco and, especially with young people, to warn against acquiring the habit of cigarette smoking, and be it further

RESOLVED, that the Ohio State Dental Association introduce a resolution in the American Dental Association House of Delegates to establish and make known to dentists and the general public a policy on the use of tobacco and its relation to systemic and oral health."

Resolution adopted by the House of Delegates, Ohio State Dental Association, September 24, 1963. Published in the Ohio Dental Journal 37: page 279, December 1963. See Appendix I, Exhibit 43.

MEDICAL SOCIETIES

10-13-63

Medical Society of Delaware

"Resolution No. 3

Be it resolved,
That the Medical Society of Delaware go on record to the effect that smoking can be a hazard to health.

Report of Reference Committee on Resolution No. 3

This resolution would place the Society on record as believing that cigarettes have the potential to damage health. Your committee believes that this is an affirmation of a generally accepted medical fact, and recommends adoption of this resolution.

The report was accepted."

Resolution adopted by the House of Delegates, Medical Society of Delaware, October 13, 1963. Published in the Delaware Medical Journal, page 47, February 1964. See Appendix I, Exhibit 44.

GOVERNMENTAL PUBLIC HEALTH BODIES AND OFFICIALS

6-1-59 "

California State Department of Public Health

"... the evidence both from our own research and that of others has become conclusive that cigarette smoking is an important causative factor in lung cancer. It is possible that research now in progress may definitely implicate additional factors. However, the weight of evidence with regard to cigarette smoking as a cause of lung cancer is now so great that the Department must bring the matter to the attention of the public."

From booklet "Cigarette Smoking and Health" published by the California State Department of Public Health, page 23, August, 1963. See Appendix I, Exhibit 45. Also published in CALIFORNIA'S HEALTH, Official bi-monthly publication of the California State Department of Public Health, 16:161-162, 1959.

August
1963

"This paper summarizes data gathered by the California State Department of Public Health which indicate the health-damaging effect of cigarette smoking. These data include both retrospective and prospective mortality studies which confirm the findings of many others, and morbidity and physiologic findings as well.

It is evident that the adverse effect of cigarette smoking on human health can be measured not only in terms of mortality and anatomical changes, but also in terms of morbidity and physiologic impairment. It has been well established that cigarette smoking increases many times the risk of lung cancer - the greater the amount of smoking, the greater the risk. Cigarette smoking substantially increases the risk of dying from coronary heart disease and other diseases as well . . ."

From booklet "Cigarette Smoking and Health" published by the California State Department of Public Health, page 19, "Summary and Conclusions", August, 1963. See Appendix I, Exhibit 45.

7-19-63

California State Board of Health

"The scientific data and authoritative statements in 'Cigarette Smoking and Health', submitted by the Department of Public Health to the State Board of Health on July 19, 1963, demonstrates that:

7-19-63

California State Board of Health (cont.)

1. The risk of dying from lung cancer is 14 times as high among cigarette smokers as among non-cigarette smokers, and 26 times higher for those who smoke two or more packs a day.
2. If the trend of lung cancer death rate continues in California, 100,000 California children now of school age will die from lung cancer before reaching the age of 70.
3. Deaths from coronary heart disease are almost twice as high among cigarette smokers as among non-smokers.
4. Men in the 25-64 year age group who smoke cigarettes suffer more activity-limiting chronic disease and disability than non-smokers.
5. According to a 1955 survey, Californians, both male and female, smoke more cigarettes than in the nation at large; of particular significance is that smoking among persons under 24 years of age is substantially greater than in the nation as a whole.

These and other data in the paper provide a firm, compelling basis for action to control cigarette smoking in California as a severe hazard to health.

Therefore, be it resolved that the State Board of Health favors initiation of a statewide campaign to control cigarette smoking along the lines outlined in the above-mentioned paper."

Adopted by California State Board of Health, July 19, 1963, as reported on page 5 of the booklet "Cigarette Smoking and Health" published by the California State Department of Public Health, August 1963. See Appendix I, Exhibit 36

1963

New Jersey State Department of Health

"There is a great deal of evidence to show that cigarette smoking is associated with increased incidence to lung cancer, peripheral vascular disease, coronary artery disease, and respiratory disorders.

2024991672

1963

New Jersey State Department of Health (cont.)

Studies show that the risk rises in proportion to the amount of smoking done by the individual and the length of time he continues to smoke. Further, stopping cigarette smoking is beneficial, even after long exposure.

Because cigarette smoking is a public health hazard, the New Jersey State Department of Health recommends that:

1. If you don't smoke, don't start.
2. If you smoke, quit.
3. If you can't quit, cut down."

From "Statement on Cigarette Smoking and Health" by the New Jersey State Department of Health. Published in September 1963 issue of "Public Health News". See Appendix I, Exhibit 46 (back cover)

January
1964

State Health Commissioner, Michigan Department of Health

"Now that we have the report of the Surgeon General's Task Force Committee on cigarette smoking and health, it seems to me that the mounting weight of evidence should convince even the most skeptical that cigarette smoking is a real danger to health as well as life.

* * *

"The report confirmed the fact that cigarette smokers are from 9 to 20 times as likely to die from lung cancer as non-smokers, depending upon the amount of smoking.

Now, this is not particularly new. We've had evidence to this effect for some time. As a matter of fact, this was the basis for my speaking out against cigarette smoking originally - in 1960 when two weekly radio talks were devoted to the subject. But as the report goes on to show, lung cancer is only one of many diseases or conditions associated with cigarette smoking.

For example, this study shows us that the chances of dying from coronary heart diseases are greater among smokers as compared to non-smokers. It points up the fact that cigarette smokers are more likely to die from emphysema as compared with non-smokers.

2024991673

January
1964

State Health Commissioner, Michigan Dept. of Health (cont.)

It points out that smoking is the most important cause of chronic bronchitis, and increases the risk of dying from this disease.

But even this is a small part of the total picture. The evidence is now quite conclusive that the risk of death from all causes is increased from 40 to 120 percent for smokers as compared to non-smokers - and mortality is only one measurement. Although there has been no definite cause-effect relationship established, the studies show that cigarette smokers suffer more disability, are sick more often, and are hospitalized more frequently than are non-smokers.

And as we all know, such common conditions as coughing, wheezing, shortness of breath, etc., are much more frequent among smokers.

Even more than this, though, there is considerable evidence that cigarette smoking has a harmful effect on physical and mental efficiency aside from any specific disease.

Studies of pulmonary efficiency reveal that many cigarette smokers have a blood level of carbon monoxide up to 10 percent, and have a concentration of carbon monoxide in expired breath of up to 50 parts per million. Both of these figures are well within the range of carbon monoxide concentration which can produce physical and mental impairment. * * *

From Michigan Department of Health's publication "Michigan's Health", 52: 1 and 8, January 1964. See Appendix I, Exhibit 47

1-22-64

Michigan Governor's Conference Recommendations On Cigarette Hazard

Among the nine recommendations for a strong Michigan anti-cigarette program was the following:

"That the State Health Commissioner take appropriate steps to promote the development of a meaningful national program of labeling cigarette packages as 'Dangerous to Health'".

From Michigan Department of Health's publication "Michigan's Health", 52: 8, January 1964. See Appendix I, Exhibit 48

8-22-58

New York State Commissioner of Health

"There is now no reasonable doubt on the part of authoritative health agencies concerned with cancer that the use of tobacco acts in some way to increase the chances of developing lung cancer to a significant degree."

From Health News: Official monthly publication of the New York State Department of Health. 35: 15-17, September 1958, as reported on pages 22 and 26 of booklet "Cigarette Smoking and Health." See Appendix I, Exhibits 49 & 45.

1959

New York State Department of Health

"The evidence indicates that persons who smoke cigarettes increase their chances of developing lung cancer. There is no evidence to contradict this conclusion. This does not mean that cigarette smoking is considered to be the sole or essential cause of lung cancer or that it may not require other causative factors or act in conjunction with them. The role of air pollution, exhaust from cars, trucks, and buses, and other irritants remains to be established. Some investigators have felt that previous attacks of influenza or bronchitis may have a causal relationship to subsequent lung cancer. The Bureau of Cancer Control of the New York State Department of Health has not been able to demonstrate any differences in incidence rates or mortality rates of lung cancer for groups of men exposed to the influenza epidemic in 1918-1920 as compared to lung cancer rates in those born after that date and consequently not exposed to the epidemic.

The hypothesis has been advanced that lung cancer occurs more often in smokers because people who smoke also have some constitutional or hormonal abnormality that increases their susceptibility to lung cancer. Lung cancer in man has not been linked with any constitutional or hormonal abnormality nor has it been shown that cigarette smokers have any inherent constitutional or hormonal abnormality. However, even if this were to be shown, it would not necessarily exclude cigarette smoking as a causative factor that enhances the effect of these or other causative factors.

From the practical standpoint, we believe there is already enough evidence incriminating cigarette smoking to justify advising the public that the available evidence is consistent with the view that cigarette smoking is one

1959

New York State Department of Health (cont.)

of the causative factors in lung cancer and that stopping cigarette smoking may therefore be a means of lowering the incidence of lung cancer."

From Manual on "Cigarette Smoking and Lung Cancer", pages 29 and 30 of "Conclusion", published by the New York State Department of Health, 1959. See Appendix I, Exhibit 50

February
1964

Roswell Park Memorial Institute of the New York State
Department of Health

"Cigarette Smoking and Lung Cancer
Vital Statistics

"For the past few decades, lung cancer death rates have been climbing rapidly. For example, in New York State in 1931-33, 5.04 males per 100,000 died of the disease. The death rate subsequently rose to 12.8 (1939-41), 27.6 (1949-51), and in 1961 reached 47.2. The 1961 rate is eight times the corresponding rate for 1931-33.

* * *

Retrospective Studies

Over 20 retrospective studies throughout the world have shown that the risk of lung cancer is much greater for cigarette smokers than for non-smokers. A recent Roswell Park Memorial Institute study shows the risk of lung cancer to be six times higher for smokers than non-smokers.

Few lung cancer patients are non-smokers. At Roswell Park, 98.2% of all patients with epidermoid cancer of the lung were smokers.

Prospective Studies

All 4 prospective studies (in which smoking histories were obtained from persons who were healthy at the time they entered the study) have confirmed the earlier retrospective studies. In one nation-wide U.S. study, the risk for cigarette smokers was 8.3 times that for non-smokers.

The risk of lung cancer increases as the number of cigarettes smoked per day increases. In one nation-wide study, the death rate from lung cancer per

February
1964

Roswell Park Memorial Institute of the New York State
Department of Health (cont.)

100,000 was respectively 51.4 (less than one-half pack of cigarettes per day), 59.3 (one-half to one pack per day), 143.9 (one to two packs), and 217.3 (over two packs). For non-smokers, the death rate was only 3.4 per 100,000.

* * *

Cigarette Smoking and Heart Disease

Earlier Prospective Studies

The death rate from coronary heart disease for cigarette smokers was 70% higher than that for non-smokers in the American Cancer Society study. The differential was slightly less (63%) for Veterans Administration policy holders.

* * *

Recent Prospective Studies

The statistical association between heavy cigarette smoking and the occurrence of coronary artery disease was confirmed by prospective studies with industrial and fraternal organizations.

In a study of 4,000 men (Albany, N.Y., and Framingham, Massachusetts) followed for 6 years, there was a three-fold increase in mortality from coronary heart disease found in cigarette smokers who smoked more than one pack per day.

There are many agents found in tobacco smoke. Chemicals known as hydrocarbons are the causal substances in lung cancer while nicotine is related to the development of cardiovascular disease.

Cigarette Smoking and Other Diseases

Studies based on patients and on follow-ups of health smokers and non-smokers to see who later develop the disease show that the risk of cancer of the bladder, larynx, esophagus, and buccal cavity are from 2 to 5 times higher for cigarette smokers than for non-smokers.

Nation-wide studies in both the United States and England show that cigarette smokers have considerably more mortality from respiratory diseases, such as emphysema and bronchitis. A recent American follow-up study shows the risk of smokers for these diseases to be over 3 times that of non-smokers.

* * *

2024991677

February
1964

Roswell Park Memorial Institute of the New York State
Department of Health (cont.)

Teen-age Smoking Habits

Gilbert Youth Research Inc. reports that smoking by teen-agers has increased 8% between the years of 1960-62.

Approximately 5,000 teen-agers get interested in smoking each day. Approximately 10% of habitual smoking begins at the 7th grade level. By the 12th grade, half of the students are habitual smokers.

* * *

Influences on Smoking Habits

Recent studies suggest that the two main factors that influence teen-agers to smoke are probably parental smoking (or parental tolerance of teen-age smoking) and continuous exposure to cigarette advertising.

The brunt of the pressure of \$150,000,000 worth of advertising per year is directed at young people. About 40% of the advertising in college magazines is financed by the tobacco industry. Other incentive plans are sponsored by tobacco companies on campuses to encourage smoking.

* * *

Committee Recommendations

Education concerning the health hazards of cigarette smoking should be provided to all age groups.

Warnings should be placed on all cigarette packages."

* * *

From report on "Health Hazards of Smoking" by Cigarette Cancer Committee, Roswell Park Memorial Institute, New York State Department of Health, Revised and re-printed October 1963 and February 1964. See Appendix I, Exhibit 51

April
1963

Oregon State Board of Health

"WHEREAS, the Oregon State Board of Health is vested with the responsibility of protecting the health of the citizens of Oregon, and

WHEREAS, a preponderance of clinical and other scientific evidence indicates an adverse relationship between cigarette smoking and chronic bronchitis, emphysema, heart

April
1963

Oregon State Board of Health (cont.)

and circulatory diseases, asthma, and cancer of the lungs, mouth, and throat; and

WHEREAS, the non-smoker has a lower incidence of lung cancer than the smoker in all controlled studies, whether analyzed in terms of rural areas, urban regions, industrial occupations or sex; and

WHEREAS, the life expectancy of smokers is significantly less than that of non-smokers, and

WHEREAS, the crude death rate for cigarette smokers is 68 per cent higher than for non-smokers; Therefore, be it

RESOLVED, that the Oregon State Board of Health go on record as favoring an educational campaign presenting smoking and health facts to the people of Oregon, and be it further

RESOLVED, that the Oregon State Board of Health cooperate with other agencies and professional groups in education of the public about the harmful effects of cigarette smoking on health."

Adopted April, 1963. See Appendix I, Exhibit 52

September
1957

Surgeon General, United States Public Health Service

"The Public Health Service is, of course, concerned with broad factors which substantially affect the health of the American people. The Service also has a responsibility to bring health facts to the attention of the health professions and the public.

* * *

"In the light of these studies, it is clear that there is an increasing and consistent body of evidence that excessive cigarette smoking is one of the causative factors in lung cancer.

The Study Group, appraising 18 independent studies, reported that lung cancer occurs much more frequently among cigarette smokers than among nonsmokers, and there is a direct relationship between the incidence of lung cancer and the amount smoked. This finding was reinforced by the more recent report by Dr. Hammond and Dr. Horn.

Many independent studies thus have confirmed beyond reasonable doubt that there is a high degree of statistical association between lung cancer and heavy and prolonged cigarette smoking.

While there are naturally differences of opinion in interpreting the data on lung cancer and cigarette smoking, the Public Health Service feels the weight of the evidence is increasingly pointing in one direction: that excessive smoking is one of the causative factors in lung cancer."

* * *

From statement on "Excessive Cigarette Smoking" published in Public Health Reports, 72:786, September, 1957. See Appendix I, Exhibit 53

11-28-59

Surgeon General, United States Public Health Service

"Conclusions

"It is a statutory responsibility of the Public Health Service to inform members of the medical profession and the public on all matters relating to important public health issues. The relationship between smoking and lung cancer constitutes such an issue and falls within this responsibility of the Public Health Service.

The Public Health Service believes that the following statements are justified by studies to date. 1. The weight of evidence at present implicates smoking as the principal etiological factor in the increased incidence of lung cancer. 2. Cigarette smoking particularly is associated with an increased chance of developing lung cancer. 3. Stopping cigarette smoking even after long exposure is beneficial. 4. No method of treating tobacco or filtering the smoke has been demonstrated to be effective in materially reducing or eliminating the hazard of lung cancer. 5. The nonsmoker has a lower incidence of lung cancer than the smoker in all controlled studies, whether analyzed in terms of rural areas, urban regions, industrial occupations, or sex. 6. Persons who have never smoked at all (cigarettes, cigars, or pipe) have the best chance of escaping lung cancer. 7. Unless the use of tobacco can be made safe, the individual person's risk of lung cancer can best be reduced by the elimination of smoking."

From the Special Article, "Smoking and Lung Cancer - A Statement of the Public Health Service" published in the Journal of the American Medical Association, 171: 1829-1837, November 28, 1959, See Appendix I, Exhibit 54

April

1962

Statement appearing in "MAN AGAINST CANCER" Exhibit-
made by the Surgeon General, U.S. Public Health Service:

"The weight of scientific evidence resulting from epidemiological and laboratory investigations carried out in the United States and abroad within the past several decades demonstrates that cigarette smoking is a major cause of the increase in cancer of the lung. It is clear that an individual's risk to lung cancer rises in relation to the number of cigarettes smoked. Everyone should be aware of these conclusions because of their importance to health."

From "Man Against Cancer" exhibit presented by the National Cancer Institute of the Public Health Service, Department of Health, Education and Welfare, and the American Cancer Society, Inc., to mark 25 years of progress, as reported by the American Cancer Society, Inc.

1-27-64

United States Public Health Service

"The Public Health Service announced today its full acceptance of the principal findings and conclusions of the Report of the Surgeon General's Advisory Committee on Smoking and Health.

Surgeon General Luther L. Terry said that the Service is now developing programs for action which are needed and feasible in light of the findings and conclusions. These plans, to be announced shortly, will cover education, public information and research activities.

Also among the early actions of the Service has been the following notification to the Medical Officers in Charge of the 16 Public Health Service Hospitals and 50 Indian Hospitals:

'In view of the findings of the Surgeon General's Advisory Committee on Smoking and Health, the following actions are to be undertaken at all Public Health Service facilities where medical care is provided:

1. Acceptance of free cigarettes for distribution to patients will be discontinued immediately.
2. Medical Officers in Charge are urged to conduct educational programs for patients on the harmful effects of smoking
3. Physicians are urged to counsel individual patients on the dangers of smoking.' "

U.S. Department of Health, Education and Welfare, Public Health Service News Release, 1-27-64, See Appendix I, Exhibit 55

9-17-62

Surgeon General - U. S. Air Force

- "1. The ever-increasing evidence linking cigarette smoking with lung cancer, pulmonary diseases, cardiovascular diseases, etc., can no longer be ignored. The Surgeon General, USAF has taken a firm stand on this issue and has informed the tobacco companies that gift cigarettes are no longer acceptable.
2. To allow the free distribution of cigarettes in our hospitals and in flight lunches suggests to our personnel that the Air Force Medical Service, in effect condones cigarette smoking. To do so is to repudiate the overwhelming evidence of many medical research teams working independently on a world-wide basis.
3. Henceforth, gift cigarettes will not be accepted for free distribution to patients in USAF Hospitals, nor will they be placed in flight lunch boxes."

From an order of R. L. Bohannon, Major General, USAF, MC, Deputy Surgeon General, USAF, September 17, 1962. See Appendix I, Exhibit 56.

2-5-64

Veterans Administration

"The distribution of free cigarettes and other tobacco products in the nation's largest chain of hospitals was discontinued in an order issued today by the Veterans Administration to its 168 hospitals. The prohibition also applies to VA's 18 domiciliaries.

The action follows an intensive study and evaluation of the "smoking and health" report of the Advisory Committee to the U. S. Surgeon General.

Coupled with the ban, VA said, will be an educational campaign to inform VA hospital patients, domiciliary members and VA employees of the health hazards incurred by smoking in a effort to discourage the practice.

Today's order is the first in VA applying to all of that agency's hospitals. Previously, the distribution of free cigarettes was left to the medical judgment of individual hospital directors.

A number of VA hospitals had discontinued the practice prior to release of the "smoking and health" report, some as long as four or five years ago. Still other hospitals halted distribution earlier this year after the report was released. In general, these hospitals

report, the ban has been cooperatively received by patients, and by service organizations which had been distributing the cigarettes."

Veterans Administration News Release, February 5, 1964.
See Appendix I, Exhibit 57.

IN FOREIGN COUNTRIES

AUSTRALIA

1958 Anti-Cancer Campaign Committee, University of
Adelaide, Australia

"The fact that a direct relationship between heavy smoking and the incidence of lung cancer has now been established beyond all reasonable doubt. The latest authoritative evidence supporting this conclusion is contained in the recent report of the Medical Research Council of Great Britain * * *"

From page 20 of "Good Health", Quarterly Bulletin of the Department of Public Health, South Australia, October 1958. See Appendix II, Exhibit I.

CANADA

10-1-58 National Cancer Institute of Canada

"While it has not been established that cigarette smoking is a cause of lung cancer, statistical studies show that cigarette smokers have a greater risk of dying of lung cancer than have non-smokers and the risk increases with the amount smoked."

From report on "Lung Cancer and Smoking" published in the Canadian Medical Journal 79:566-568, October 1, 1958. See Appendix II, Exhibit 2.

10-20-62 "In reviewing, once again, the problem of smoking and lung cancer, the National Cancer Institute of Canada believes that the available statistical and epidemiological evidence of the association between smoking and lung cancer favours the conclusion that cigarette smoking is an important factor in the causation of lung cancer and is largely responsible for the dramatic and continuing increase in recorded lung cancer death rates."

From the Second Report on "Lung Cancer and Smoking" published in the Canadian Medical Association Journal 87:879, October 20, 1962 and from the National Cancer Institute of Canada "Brief to the National Conference on Smoking and Health," Ottawa, November 25 and 26, 1963. See Appendix II, Exhibits 3 and 4.

April
1962

Dominion Council of Health of Canada

"The Dominion Council of Health believes that in view of the progressive increase in the number of lung cancer deaths in Canada, there is justification for the following statements on the basis of numerous studies:

1. Overwhelming evidence shows a direct relationship between cigarette smoking and lung cancer.
2. The risk of lung cancer increases in proportion to the number of cigarettes smoked daily and the number of years cigarettes have been used.
3. Evidence indicates a lesser danger from the use of tobacco in cigars and pipes.
4. Discontinuance of smoking even after long use reduces the risk of lung cancer.
5. To date attempts by filtering cigarette smoking to remove injurious substances do not appear to be satisfactory - a false sense of security would appear to go along with the use of filters.
6. Further, since smoking is a form of addiction, the most practical preventive measure is to encourage young people not to commence the habit of smoking."

Statement by Dominion Council of Health of Canada as reported by Department of National Health and Welfare, Ottawa, Canada. See Appendix II, Exhibit 38.

2-23-63

Saskatchewan Cancer Commission

"The evidence linking cigarette smoking with the subsequent development of lung cancer is conclusive. It is known that this hazard increases in proportion to the number of cigarettes smoked per day and the number of years during which the individual has smoked. Since it is very difficult to influence hardened smokers, education and information concerning this problem is likely to be most fruitful when it is directed to those young people who have not yet acquired the habit. The efforts of the Canadian Cancer Society, which is trying to influence young people, and especially teenagers in schools are especially to be commended in this regard.

"It is considered, however, that measures designed to discourage young people from smoking are considerably handicapped by the widespread advertising of cigarettes. These advertisements, particularly on television, frequently appear to be aimed at the young and impressionable, and

present the smoking of cigarettes of one brand or other as a desirable and pleasurable habit of sophisticated and successful people.

"Since the dissemination of such information is contrary to the public interest, the Saskatchewan Cancer Commission strongly recommends that steps be taken by the appropriate authorities to prohibit the advertisement of cigarettes by all media."

From Minutes of Meeting of Saskatchewan Cancer Commission, Saskatoon, Canada. Reported by the American Cancer Society, Inc. and in "Editor & Publisher" for April 13, 1963, page 24. See Appendix II. Exhibit 5.

11-25-63

Government of Saskatchewan. Department of Public Health

* * *

"The Saskatchewan Department of Public Health believes that the evidence implicating smoking as a causal factor in lung cancer has now accumulated to a degree sufficient to warrant authorities adopting the relationship as a working principle. If this conference has difficulty in deciding whether to accept such a relationship as factual, because the argument has not been clinched 'beyond reasonable doubt', the Saskatchewan Department of Public Health urges that the word 'reasonable' must be interpreted in relation to the stakes involved -- 2,500 lung cancer deaths per year in Canada and rising. * * *

Limitation of Advertising: The Saskatchewan Department of Public Health views with concern the advertising endeavours of the tobacco companies, in so far as these endeavours encourage young non-smokers to adopt the smoking habit. The difficulty facing health authorities is that of persuading people to break an established pattern, and it is logical to prevent that pattern being established in the first instance. It is suggested, therefore, that the federal government examine the possibility of applying limitations to mass-media advertising in extent or content or both.

Warning Notices: It is further recommended that consideration be given to the inclusion of a printed warning on each unit sold. Moreover, if advertising is not totally disallowed, such a warning to point out the possible consequences in terms of ill-health should be included in every advertisement. * * *

From "Statement To The Ottawa Conference on Smoking and Health" held by Canadian Department of National Health and Welfare, Ottawa, November 25 and 26, 1963. See Appendix II, Exhibit 6.

11-20-63

Government of Manitoba

"The Government of Manitoba accepts as factual, the evidence that has been presented by medical and other scientific authorities, of the direct relationship between cigarette smoking and diseases of the lungs and cardiovascular system. The official position of our province is expressed in the following resolution which was unanimously passed at the most recent session of the Manitoba Legislature:

'WHEREAS the smoking of cigarettes has been shown to be a large contributor to lung cancer, other respiratory ailments and coronary disease, and

WHEREAS the recruitment of school children to cigarette smoking is increasing at an alarming rate;

THEREFORE BE IT RESOLVED that this Legislature humbly request the Minister of Health investigate ways and means to encourage in every possible way, any positive approach designed to reduce the recruitment of children to smoking.

AND THEREFORE BE IT FURTHER RESOLVED that this Legislature oppose the use of any advertisement, audio as well as visual, intended to influence our young people to take up cigarette smoking because cigarette smoking has been proven to contribute to lung cancer and other serious diseases.'

The Government of Manitoba recognizes that its share of responsibility for action in this field lies in health education, through its own programs, as well as in co-operation with other agencies who are planning an active role in this important public health problem. These include the Manitoba branches of the Canadian Cancer Society and the Canadian Medical Association, as well as our Manitoba Cancer and Heart Foundations. It is significant also that the Manitoba Federation of Labour very recently became the first Canadian labour body to take an open stand by resolution, opposing tobacco advertising as misleading and endangering the nation's health."

From "Statement For Presentation To The National Conference on Smoking and Health," November 20, 1963. See Appendix II, Exhibit 7.

November
1963

Government of British Columbia

"The Government of British Columbia, in recognition of the health risks associated with the use of tobacco, particularly cigarettes, recommends that measures employed to curb smoking should be primarily educational in nature. Such measures should be directed toward reducing the number of children who commence smoking at an early age, and toward the establishment of facilities for smokers who wish to discontinue the habit."

From "Statement on Smoking and Health" presented at Conference on Smoking and Health held by Canadian Department of National Health and Welfare, Ottawa, November 1963. See Appendix II, Exhibit 8.

Minister of Health Services and Hospital Insurance,
Government of British Columbia

"Cigarettes kill just as surely as if one were to take poison. They kill and they maim. * * * Cigarettes are killers. Facts show that lung cancer and cigarette smoking are linked. What more is needed before some sort of action results?"

From his Foreword to the "Statement on Smoking and Health" presented at Conference on Smoking and Health held by Canadian Department of National Health and Welfare, Ottawa, November 1963. See Appendix II, Exhibit 8.

5-19-62

The Canadian Medical Association

"The causal relationship between smoking, particularly cigarette smoking, and the alarming increase in cancer of the lung is now accepted in medical and scientific circles. The presence of multiple carcinogens in cigarette smoke has been demonstrated, and careful studies suggest that a prolonged period of exposure is required before malignancy develops in susceptible subjects. The acceptance of these concepts leads to the conclusion that efforts should be made to discourage smoking among young people. The Committee on Public Health, reporting in 1961, received the approval of the General Council of the C.M.A. in the following statement:

"The weight of evidence at present implicates cigarette smoking as the principal causative factor

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Canadian Medical Association (con'd)

in the increased incidence of lung cancer. Therefore, there is here a public health problem of which the profession and the public should be aware. It is the duty of the individual doctor to point out the relationship of cigarette smoking and cancer to his patients; of departments of health and other health agencies to educate the public to the hazards of cigarette smoking and of authorities entrusted with health education in the schools to bring home to students the possible consequences that may follow the use of tobacco, especially in the form of cigarettes.'

The difficulty of changing the habits of people, particularly where their pleasures are involved, is appreciated, but the seriousness of the increase in lung cancer is very real. Legislative efforts in the direction of prohibition, including the enforcement of the Tobacco Restraint Act 1952, are not highly regarded and we do not suggest that the Commission consider them. We do suggest that the public health problem be recognized and that the Commission add its voice to those who are endeavouring to educate the public in the inherent dangers of cigarette smoking, particularly to prevent the acquisition of the habit by young people."

From a Submission of the Canadian Medical Association to The Royal Commission on Health Services, May 1962, Canadian Medical Association Journal, 86:912-913, May 19, 1962. See Appendix II, Exhibit 9.

6-12-63

Canadian Medical Association, Committee on Cancer

"The Canadian Medical Association through its Committee on Cancer, has assumed in 1962 and 1963 a new major responsibility, namely, to stimulate, advise and assist in the institution of a broad program of public education on the problem of cigarette smoking and lung cancer.* * * The scientific evidence underlying the relationship of cigarette smoking and lung cancer was reviewed and this relationship was accepted as firmly established.

The chief means of prevention of lung cancer and other tobacco-related disease is preventive education. * * *

A program of public education cannot succeed until the medical profession responds realistically to the grave and extensive public health problem which has been created by the widespread use of tobacco in the form of cigarettes.* * *

It is recommended that a brief be submitted to the Federal Government, which would include (1) a summary of the situation with respect to lung cancer in Canada; (2) references to action taken by the governments of other countries; (3) certain specific requests embracing (a) a declaration by the Minister of National Health and Welfare that lung cancer is a major public health problem, and that there is a definite relationship between cigarette smoking and lung cancer (b) an investigation by the Dominion Council of Health of measures which might be taken to meet this problem arising from the widespread use of cigarettes (c) recognition of the importance of protecting school children against the adoption of the smoking habit; for this reason certain provisions of the Tobacco Restraint Act should be enforced, and, (d) a request that consideration be given to legislative measures to apply cautionary labels to the packaged product." * * *

From resolutions adopted by General Council, Canadian Medical Association, June 12, 1963, calling for recognition by the Federal, Provincial and Municipal Governments and Departments of Education of the problems of cigarette smoking and its causal relationship to lung cancer; and other actions. See Appendix II Exhibit 10.

November
1963

Canadian Medical Association

"The Canadian Medical Association welcomes the opportunity afforded by the Minister of National Health and Welfare, to discuss the health problems created by the use of tobacco and, in particular, by its use in the form of cigarettes.

* * *

Studies In The Causation Of Lung Cancer

Over 100 years ago it was established that the occurrence of cancer of the buccal cavity was restricted almost entirely to those who smoked pipes or chewed tobacco. Since mouth cancer was not a major source of mortality, it did not become a matter of public concern and in more recent years the consumption of tobacco in pipes has declined.

It is over 25 years since the first reports were published which suggested there was a causal relationship between the smoking of cigarettes and lung cancer. These conclusions were based on clinical observations

Canadian Medical Association (con'd)

of relatively small groups of patients with lung cancer. At about the same time it was reported that tar-like extracts of tobacco could cause cancer of the skin of rabbits.

The clinical observations led to more extensive investigations of the type called retrospective studies. In these, the smoking histories of patients with lung cancer were compared with control groups of healthy persons, or of patients with other diseases. At least 23 studies of this nature have been carried out and in each the results have been consistent in that there were more heavy smokers and fewer non-smokers among patients with lung cancer than among the members of the control groups.

A second type of approach has been the prospective study in which the smoking habits of a large number of persons have been recorded and the members of the sample population have been followed for a number of years. Included in the studies of the latter type is one conducted by the Department of National Health and Welfare, among Canadian war veterans in receipt of pension.

In all these studies the findings have been consistent: mortality rates due to lung cancer have been up to 30 times greater in those who smoked over 20 cigarettes a day than in those who never smoked. * * *

* * *

Other Tobacco-Related Diseases

In the course of the prospective studies it became apparent that not only was lung cancer many times more frequent in cigarette smokers than in non-smokers but the total death rate was higher than the expected death rate, as established in non-smokers. The excess deaths that made up this increase were due to coronary heart disease, other vascular diseases, cancer of the buccal cavity and of the bladder, gastric and duodenal ulcer and pulmonary disease other than cancer. In one major prospective study, over 50% of the excess deaths recorded in those who smoked cigarettes was due to coronary artery disease; in the same study the relative death rate due to lung cancer in smokers was approximately 11 times that of non-smokers.

In addition to excess mortality, attention must be given to the reported increase in morbidity due to the causation and exacerbation of chronic bronchitis, the exacerbation of duodenal ulcer and of thromboangiitis obliterans (an obstructing disease of the blood vessels).

* * *

Canadian Medical Association (cont'd.)

Summary

1. There has been a marked increase in the mortality due to lung cancer in Canada during the past 30 years. The increase has been greatest in males.
2. Prospective and retrospective studies in humans have established a causal, though not necessarily an exclusive, relationship between this disease and the smoking of cigarettes.
3. Not only the mortality rate due to lung cancer but also the total death rate is much higher in smokers than in non-smokers; a major contribution to the total increase is made by coronary artery disease.
4. The annual consumption of cigarettes per person over the age of 15 in Canada has increased four-fold since 1935.
5. As measures designed to reduce this public health problem, The Canadian Medical Association:
 - (a) will carry out a concerted program of professional education for its members;
 - (b) requests the Federal Government to provide the stimulus for an all-important program of public education by publicly recognizing the relationship between lung cancer and the smoking of cigarettes;
 - (c) requests the Department of National Health and Welfare to make educational material available on the dangers to health of cigarette smoking, and to encourage similar activity at provincial and municipal levels;
 - (d) recommends that research on the nature of tobacco habituation be initiated;
 - (e) recommends that, as an interim step in the production of an entirely safe cigarette, cigarettes of lower tar and nicotine content be produced, and that the content of these substances be described on each cigarette package;
 - (f) recommends that, in general, the content of advertising be altered to promote moderation and to discourage the use of the product by children and young adults;

- (g) recommends that certain provisions of the Tobacco Restraint Act be enforced;
- (h) recommends that ways and means of encouraging the use of less-dangerous forms of tobacco be explored."

From Canadian Medical Association's "Brief to the National Conference on Smoking and Health," Ottawa, November 25 & 26, 1963. Appendix II, Exhibit 11.

6-7-63

Canadian Thoracic Society, Canadian Tuberculosis Association

"Since it is recognized that the inhalation of tobacco tar products has a wide range of harmful effects not only on the respiratory system but other essential body processes, the Canadian Thoracic Society places itself on record as condemning the inhalation of tobacco tar products as detrimental to the general health and welfare of the Canadian people and also incriminating this habit as one of the causative factors of carcinoma of the lung."

Resolution passed by the Canadian Thoracic Society and endorsed by the Canadian Tuberculosis Association at their annual meetings on June 7, 1963, as reported on page 4 of Appendix III of the "Presentation of the Department of National Health and Welfare" on "Smoking and Health" prepared for the Canadian Conference on "Smoking and Health," Ottawa, November 25 & 26, 1963. See Appendix II, Exhibit 19.

9-28-62

New Brunswick Medical Society

"Whereas it has been scientifically demonstrated and accepted by recognized authorities that there is a connection between smoking and an increasing incidence of fatal diseases of the chest, heart and arterial systems, be it Resolved that the New Brunswick Society goes on record as recommending to the people of this Province that smoking in any form is a dangerous habit. It further recommends to the Canadian Medical Association that an approach be made to the Federal Government regarding the banning of advertisement of tobacco products"

From the proceedings of the New Brunswick Medical Society, 1962, Annual Meeting, as reported by the American Cancer Society Inc. See Appendix II, Exhibit 12.

1960

Canadian Public Health Association

"WHEREAS there is a considerable body of statistical evidence that the use of cigarettes is a hazard to health;

"BE IT RESOLVED that the Canadian Public Health Association urges all interested agencies to carry on vigorous educational programs designed to acquaint the public with the hazards of smoking. It is further recommended that this campaign be aimed particularly at encouraging young people not to acquire the habit."

From "Statement on Cigarette Smoking and Health" prepared by the Canadian Public Health Association for a National Conference on Smoking and Health to be held in Ottawa, Canada, November 25 and 26, 1963. See Appendix II, Exhibit 13, page 3.

July
1963

"WHEREAS the Canadian Public Health Association is dedicated to the promotion of health and the prevention or control of disease; and has a duty to stimulate, guide and assist the public in such matters; and

"WHEREAS the Canadian Public Health Association accepts the evidence that cigarette smoking is a major and the most readily controllable cause of lung cancer; and

"WHEREAS the Association also accepts the evidence that cigarette smoking contributes to illness and death from other diseases of the lungs and cardiovascular system,

"BE IT THEREFORE RESOLVED that the Canadian Public Health Association believes that every public health worker has a duty to become thoroughly familiar with the available evidence concerning this serious health hazard and has a duty to play his or her total role by education and example in the prevention of lung cancer and other diseases due to cigarette smoking; and

"BE IT THEREFORE FURTHER RESOLVED that the Canadian Public Health Association actively support all measures directed toward removing the hazard to health resulting from cigarette smoking."

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Canadian Public Health Association (cont.)

From "Report of the Committee on Resolutions, Canadian Public Health Association" published in Canadian Journal of Public Health 54:334-336, July 1963, and from "Statement on Cigarette Smoking and Health" prepared by the Canadian Public Health Association for a National Conference on Smoking and Health to be held in Ottawa, Canada, November 25 and 26, 1963. See Appendix II, Exhibits 14 and 13.

10-7-63

"The Canadian Public Health Association recommends:

1. That there be a planned educational approach covering a period of years by Departments of Education and Departments of Health and such ancillary organizations as Parent-Teacher groups to discourage the children and youth of this country from adopting the tobacco habit.
2. That such educational measures be introduced in primary (elementary) schools as well as secondary schools.
3. That the educational approach be extended to encourage those of more mature age who have adopted the habit to relinquish it or practice moderation.
4. That there be uniformity of health education material through an active liaison between agencies that prepare and distribute such information.
5. That selected areas of research be encouraged and give the necessary financial support. This research would include epidemiological studies and other aspects which would need to be investigated in order to provide the best methods of control.
6. That features in advertising which are likely to encourage young people to smoke be discontinued.
7. That the Tobacco Restraint Act be strengthened and enforced in respect of the restriction on the sale of tobacco products to children.

Canadian Public Health Association (can.)

8. That steps be taken to prevent the easy access of children to cigarettes such as from vending machines. If enforcement of such steps is required, provision could be made in the Tobacco Restraint Act."

From "Statement on Cigarette Smoking and Health" prepared by the Canadian Public Health Association for a National Conference on Smoking and Health to be held in Ottawa, Canada, November 25 and 26, 1963. See Appendix II, Exhibit 13, pages 6-7.

6-10-60

Canadian Cancer Society

"The Grand Council approved the adoption of a programme of education of the public about the relationship between lung cancer and smoking, with emphasis to be placed on the education of secondary school children through programmes to be initiated by the Society's provincial divisions."

From "Statement by the Canadian Cancer Society on the relationship of cigarette smoking and lung cancer, and its programme of disseminating information in respect thereto", September 26, 1963. See Appendix II, Exhibit 15.

6-9-62

"The Grand Council and the Board of Directors of the Society resolved to inform the Canadian Medical Association and L'Association des Medecins de Langue Francaise du Canada, 'that the Canadian Cancer Society desires to see a broad programme of public education on the problem of lung cancer and smoking initiated as early as expedient through the media of the Canadian Cancer Society, the Canadian Medical Association, L'Association des Medecins de Langue Francaise du Canada, and such other organizations as may be interested; and for the purpose of furthering this desire, the aforementioned Medical societies consider approaching Governments, including their Departments of Health and Education at all levels.'"

From "Statement by the Canadian Cancer Society on the relationship of cigarette smoking and lung cancer, and its programme of disseminating information in respect thereto", September 26, 1963. See Appendix II, Exhibit 15.

Canadian Heart Association

5-14-63

"While coronary heart disease is common in non-smokers, cigarette smokers suffer three times the incidence and death rate from this disease, according to recent prospective studies of normal men between 40 and 49 years of age. Cigarette smoking is also known to play a significant role in the causation of obliterative arterial disease in the extremities. Other types of peripheral arterial disease which may lead to gangrene are aggravated by the smoking of cigarettes. Although other factors may explain some of the association of cardiovascular disease with cigarette smoking, it seems reasonable, in the light of present knowledge, to suggest that those men who are unusually prone to heart disease should severely limit their smoking of cigarettes."

"A recent Canadian survey in an urban community showed that 40% of senior high school students were smoking cigarettes and that 85% of them established the habit between the ages of 12 and 16, inclusive. In view of this information, and the fact that only a small percentage of men take up smoking after this age, it would seem most desirable to take whatever steps are necessary to discourage smoking among teenagers in Canada, in an effort to reduce the toll from heart and blood vessel disease."

From "Statement on Cigarette Smoking and Cardiovascular Disease" approved by the Board of Directors, Canadian Heart Foundation, May 14, 1963, published in the Canadian Medical Association Journal 88:1175, June 8, 1963. See Appendix II, Exhibit 16.
Also see Statement of Canadian Heart Foundation on "Cigarette Smoking and Cardiovascular Disease" to the Conference on Smoking and Health, November 25 and 26, 1963. Appendix II, Exhibit 17.

November
1963

Medical Department, Seventh-day Adventist Church, Canada

"The use of tobacco has long been regarded as detrimental to health by both physicians and laymen of the Seventh-day Adventist church. In recent years an increasing emphasis has been placed by this organization on the education of the general public with respect to the greater incidence of disease and shortened life span among smokers as compared with non-smokers."

From "A Brief Presented To Those Attending The Special Conference On the Use of Tobacco" called by The Honourable Judy La Marsh, Minister of Health and Welfare of Canada, November 25-27, 1963. See Appendix II, Exhibit 18.

6-17-63 " Minister of National Health and Welfare. Department of
National Health and Welfare of Canada

"Mr. Speaker, I have been impressed with the evidence which has been presented to me in numerous reports concerning the increasing lung cancer death rate in Canada and the serious health problem that is posed by this disease. There is scientific evidence that cigarette smoking is a contributory cause of lung cancer, and that it may also be associated with chronic bronchitis and coronary heart disease.

Health agencies, including the Department of National Health and Welfare, have a duty to inform the public about the risk to health connected with cigarette smoking. It seems to me that special efforts should be made to dissuade children and young people from acquiring the habit,

In initiating a program directed to the reduction or elimination of this health hazard it will be essential, if the best possible results are to be achieved, for the Department of National Health and Welfare to work in close co-operation with provincial health and other departments, voluntary health agencies, professional associations and other groups concerned with this problem. It has therefore been decided to call an early conference to consider this matter, and I am writing to interested groups inviting them to meet with me in Ottawa. Invitations will go to the provinces through the provincial ministers of health. In addition, professional and voluntary health agencies interested in this matter will be invited to attend as well as representatives of the tobacco industry and growers.

It is hoped that at this conference there will be a full discussion of the evidence linking cigarette smoking with lung cancer and other conditions, and that proposals can be made for a positive and effective program regarding this problem."

House of Commons Debates, 108(23): 1213-14, June 17, 1963. Statement by Minister of Health and Welfare on Smoking and Health as reported in the "Presentation of the Department of National Health and Welfare" on "Smoking and Health", (pages 14 & 15), prepared for the Canadian Conference on Smoking and Health, November 25 & 26, 1963, Ottawa. See Appendix II, Exhibit 19.

11-26-63

"Mr. Barry Mather (New Westminster): Mr. Speaker, I have a question for the Minister of National Health and Welfare. Would the Minister give us a report on the discussions and dealings at her successful national conference on the relationship between smoking and disease?

11-26-63. Minister of National Health and Welfare, Department of
National Health and Welfare of Canada (cont.)

Hon. Judy V. LaMarsh (Minister of National Health and Welfare): Mr. Speaker, I would like to thank the hon. member for having given me notice that he would ask such a question. In the gallery at the moment there are some representatives of the industry and individuals who were present at the conference, which lasted for a day and a half. The conference was also attended by representatives of the departments of health of each of the 10 provinces and in some cases representatives of the departments of education and of youth, as well as the voluntary health agencies, the cancer society, heart foundation, public health institute and representatives of the growers from the provinces of Ontario and Quebec.

As a result of a very co-operative day and a half the provincial representatives agreed unanimously on the fact that smoking is harmful, and agreed to undertake co-operatively a program of education and research directed toward young people in the country and their commencing the habit. The federal government then announced it was prepared to put up \$400,000 for a program of education which would be addressed to adults, which education would take the form of a positive program and not a program based on fear. In addition, the federal government announced that it is prepared to expend the sum of \$200,000 to add to funds already available for research on lung cancer and motivational research into the smoking habit - why it is picked up and why it persists so strongly.

May I say that notwithstanding the obvious conflict of personal interest the conference proceeded in a spirit of great co-operation, in a spirit of moderation, and with a real concern for something which, it agrees, has become a national health problem in Canada."

Statement to House of Commons by the Minister of National Health and Welfare following Canadian Conference on Smoking and Health held on November 25 and 26, 1963, Ottawa. House of Commons Debates, 108(97): 5108, November 26, 1963. See Appendix II, Exhibit 19-A.

November
1963

Department of National Health and Welfare of Canada

"Introduction

Diseases of the circulatory system and malignant neoplasms are the two leading causes of death in Canada, and the

Department of National Health and Welfare of Canada (cont.)

Department of National Health and Welfare is interested in scientific evidence which may assist in the control of these diseases. To this end it collects and studies a variety of reports, provides grants for research studies, and conducts some studies itself.

"The Department is impressed by the number and variety of reports and authoritative statements concerning the effects of smoking on health. In arriving at the position set out by the Minister of National Health and Welfare in her statement to the House of Commons on June 17, 1963 (See pages 14-15), the evidence contained in the extensive literature on this subject, as well as that derived from the Department's own study, has been taken into account and, of course the stature of the tobacco industry in the Canadian economy was also considered.

"The purpose of this brief is to present scientific information and authoritative statements about smoking and health. The brief selects evidence particularly as related to Canada, and is illustrative of the general conclusions arrived at through studies and appraisals in other countries. Two complete Canadian reports are appended as they have not yet been published. A third appendix presents excerpts from statements concerning smoking and health by national and other health organizations. The last appendix shows tax revenues in Canada from tobacco products.

"This brief does not pretend to be a general review of the evidence concerning the effects of smoking on health. Several such reviews have been published recently (1-6). These are comprehensive, and include arguments both for and against an association between smoking and health.

"The association between air pollution and diseases of the respiratory system is recognized. Available evidence has been reviewed recently by Heinmann (23). Further, Hueper et al have recently reported on carcinogenic bioassays on air pollutants(24).

"The Lung Cancer Problem In Canada

* * *

"In 1963 Davies et al (Appendix I, Ref. 12) reviewed the magnitude of the lung cancer problem in Canada. He reported that, 'The death toll from lung cancer in Canada continues to mount steadily with each passing year. Although death rates have not yet increased to the same level as in certain other countries, i.e., the United Kingdom, Finland and Austria, nevertheless, a sharp increase in

mortality has occurred during the last 30 years. This elevation in death rates is attributable, in the main, to the increase in deaths from lung cancer in males, which in the period 1931 to 1961 showed a rise in standardized death rates from 3 to 24.6 per 100,000 population (an eightfold increase); the highest increase during the same period occurred in males age 70 to 74 years (an eighteenfold increase); in middle-aged men (age 50 to 59 years), a sevenfold increase took place.' Further, in 1961 of males dying from all types of cancer, lung cancer ranked first accounting for 20.3 per cent. In contrast, in 1961 lung cancer was responsible for only 3.8 per cent of all female cancer deaths.

* * *

"Epidemiological Evidence of Association Between Smoking and Lung Cancer

"In 1963, Best and Walker presented the second report of a Canadian study of smoking and health (Appendix II, Ref. 14). The study took the form of a questionnaire survey of Department of Veterans Affairs pensioners with a follow-up of deaths of pensioners who responded to the questionnaire. The duration of the study was six years starting on July 1, 1956, and ending on June 30, 1962. The data concerned 77,922 male World Wars I and II and Korean War pensioners who responded to the questionnaire and specified their smoking habits. The results were summarized in two parts, by all causes of deaths combined and by selected disease categories. For persons over 30 a comparison of age specific death rates for all causes of deaths combined showed that those who smoked cigarettes only had consistently higher death rates than non-smokers; that death rates increased consistently with the amount of cigarette smoking; and that death rates for ex-cigarette smokers were consistently lower than those for current cigarette smokers. With respect to selected disease categories it was reported that the excess of observed deaths of all smokers over the expected number for non-smokers was 454 per cent for lung cancer, 39 per cent for coronary artery disease, and 47 per cent for other heart and circulatory diseases; and that of the 2,009 excess deaths of smokers in the study, 1,241 were attributable to circulatory diseases and 662 to cancer. In general, the results were consistent with those of other prospective studies on smoking and health.

* * *

"Studies of Smoking Habits of School Children

"In 1961, Morison and Medovy (20) reported a survey of smoking habits of 21,884 Winnipeg school children which was completed in May 1960. 'The survey indicated that some children began to smoke very early and that the greatest increase was in the 11 to 16 year age-group. Students are influenced by their parents' smoking habits, and smoking is inversely related to academic achievement.'

"In 1962, Barrett (21) reported on a survey of the smoking habits of 7,682 Calgary high school students. 'It was seen that the students started to smoke at an early age. There is a high percentage of smokers in Calgary's school and many of these pupils buy their cigarettes illegally. The smokers rated badly in organized sport and very badly academically. They tend to follow the example of their parents in the adoption of the smoking habit. They take their first cigarette out of curiosity and they continue to smoke because they derive pleasure from it. The vast majority of them smoke filter-tip cigarettes and would be prepared to stop smoking if the hazards were proved to them'

"In 1963, Bailey (22) reported on a survey of 43,587 Saskatchewan high school students which was conducted in March 1963. One-third of the students smoked their first cigarette before the age of 10 and twice the number of boys as compared with girls had this experience. Almost 40 per cent of girls in each year of age from 16 to 19 were regular smokers. About 50 per cent of 16 and 17 year old boys were smokers, and 58 per cent of 19 year old boys were smokers. Of the 18 year old boys who smoked, 66 per cent smoked more than 5 cigarettes a day and 36 per cent more than 10 per day."

* * *

From "A Presentation of the Department of National Health and Welfare" of Canada on "Smoking and Health" prepared for the Canadian Conference on Smoking and Health, Ottawa, November 25 and 26, 1963. See Appendix II, Exhibit.19.

Denmark

3-7-62

Joint Committee of the Danish National Health Service,
Danish Cancer Society and Danish Medical Association.

"The Joint Committee, having studied available results of experiments and investigations, and a number of reviews, is convinced that the original clinical observations of an association between the smoking of tobacco, particularly cigarettes, and bronchial carcinoma has been statistically verified. The Committee is of the opinion that the association is causal in nature."

* * *

"As a result of the Danish Cancer Society's survey of school children, it is evident that advertising contributes in great measure to the commencement of tobacco smoking during school years. It also contributes to the constant increase in cigarette consumption, especially in the younger age group, despite the fact that the public already has been well informed about, and warned against, the risks involved in excess smoking. It shall be further pointed out that the information and health campaign originally recommended by the Joint Committee differs from all earlier disease prevention campaigns in one very special respect, i.e., it is directed against a very actively advertised article. The Joint Committee, on the strength of its qualifications, must therefore recommend that prohibitions on cigarette advertising be introduced."

From the Danish Joint Committee report on "Tobacco and Lung Cancer" (Deliberations of The Danish Joint Committee With Particular Attention to Cigarette Smoking), pages 14 and 45, published in the Danish Medical Bulletin, 9:97-116, 1962. See Appendix II, Exhibit 20.

Finland

3-22-60

Finnish Medical Association

Issued a resolution concerning the injurious effect of tobacco on the respiratory tract, with special reference to lung cancer.

From Resolution af 22. marts 1960 fra Finska Lakaresalskapet og Halsovardslakare r. f. as reported by the Danish Joint Committee on page 17 of its report on "Tobacco and Lung Cancer". See Appendix II, Exhibit 20, page 17.

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Great Britain

2-12-54

Statement of Minister of Health in the House of Commons,
England.

"The Standing Advisory Committee on Cancer and Radio-therapy have had this matter under consideration for three years. As a result of preliminary investigations, a panel under the chairmanship of the Government Actuary was set up in 1953 to enquire and report. I have now been advised by the Committee in the following terms:

"Having considered the report of the panel under the chairmanship of the Government Actuary on the statistical evidence of an association between smoking and cancer of the lung, and having reviewed the other evidence available to them, the Committee are of opinion:

- (1) It must be regarded as established that there is a relationship between smoking and cancer of the lung.
- (2) Though there is a strong presumption that the relationship is causal, there is evidence that the relationship is not a simple one, since:
 - (a) the evidence in support of the presence in tobacco smoke of a carcinogenic agent causing cancer of the lung is not yet certain:
 - (b) the statistical evidence indicates that it is unlikely that the increase in the incidence of cancer of the lung is due entirely to increases in smoking:
 - (c) the difference in incidence between urban and rural areas and between different towns, suggests that other factors may be operating, e.g. atmospheric pollution, occupational risks.
- (3) Although no immediate dramatic fall in death rates could be expected if smoking ceases, since the development of lung cancer may be the result of factors operating over many years, and although no reliable quantitative estimates can be made of the effect of smoking on the incidence of cancer of the lung, it is desirable that young people should be warned of the risks

Statement of Minister of Health in the House of Commons,
England (cont.)

apparently attendant on excessive smoking. It would appear that the risk increases with the amount smoked, particularly of cigarettes.

"I accept the Committee's view that the statistical evidence points to smoking as a factor in lung cancer, but I would draw attention to the fact that there is so far no firm evidence of the way in which smoking may cause lung cancer or of the extent to which it does so. Research into the causes of lung cancer has been pressed forward by the Government and by other agencies in view of the increase in the incidence of this disease and we must look to the results of its vigorous pursuit to determine future action."

From Statement of Minister of Health on "Smoking and Lung Cancer" as reported in Medical World, p.425, April 1954, and also in British Medical Journal 1:465, February 20, 1954. See Appendix II, Exhibits 21 and 22.

3-1-57

Statement of Parliamentary Secretary to the Ministry
of Health in the House of Commons.

"The firm intention of the Government to reveal the truth about the connexion between smoking and lung cancer as it came to light was declared by Mr. J. K. Vaughan-Morgan, Parliamentary Secretary to the Ministry of Health, at the end of a short debate in the House of Commons on March 1. In the meantime, he said, they must avoid sensationalism.

"Mr. M. Lipton (Brixton, Lab.) opened the debate with a criticism of the Government for its failure to sponsor an anti-smoking campaign.

"Mr. Vaughan-Morgan asserted that the Government had not hesitated to announce any discovery as and when it became available. There had been very little advance since the Government statement in May, 1956. Carefully controlled inquiries had shown statistically that smokers had a significantly higher mortality rate from lung cancer than non-smokers.

"There were many ways of interpreting the statistical evidence available. Without doubt the findings did constitute prima facie statistical evidence that smoking

Statement of Parliamentary Secretary to the Ministry
of Health in the House of Commons (cont.)

carried a risk of lung cancer. These mortality rates, and these risks, must be viewed with a due sense of proportion.

"Lung cancer was not the only problem, nor must it be the only preoccupation. It continued to show a steady increase, which had varied from 5.7 to 8.7% over the past five years. The Medical Research Council was engaged in an extensive programme for the purpose of throwing more light on the exact nature of the relationship between smoking and lung cancer, the long term aim being to identify those constituents of tobacco smoke which might be active in provoking cancer."

From Statement of Parliamentary Secretary to the Ministry of Health in the House of Commons on "Lung Cancer Research" as reported in the British Medical Journal 1:592-593, March 9, 1957. See Appendix II, Exhibit 23.

6-29-57

Medical Research Council of Great Britain

The Medical Research Council concludes in its statement on "Tobacco Smoking And Cancer Of The Lung" that:

1. A very great increase has occurred during the past 25 years in the death rate from lung cancer in Great Britain and other countries.
2. A relatively small number of the total cases can be attributed to specific industrial hazards.
3. A proportion of cases, the exact extent of which cannot yet be defined, may be due to atmospheric pollution.
4. Evidence from many investigations in different countries indicates that a major part of the increase is associated with tobacco smoking, particularly in the form of cigarettes. In the opinion of the Council, the most reasonable interpretation of this evidence is that the relationship is one of direct cause and effect.
5. The identification of several carcinogenic substances in tobacco smoke provides a rational basis for such a causal relationship."